



**EXHIBIT B**

Preliminary

# BASIS of DESIGN

Galveston County Medical Examiner's Office  
Relocation Feasibility Study  
Concept Review Meeting

November 12<sup>nd</sup> 2015  
November 19<sup>th</sup> 2015  
January 12<sup>th</sup> 2016

Design Criteria  
Applicable Codes  
Study Schedule  
Program/Space Needs Lists  
Optional Layout Studies  
Selected Layout Study  
MEP Narrative  
Construction Cost Estimate  
Meeting Notes



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# National Association of Medical Examiners



## Inspection and Accreditation Policies and Procedures Manual

First Draft Submitted June 1999

Second Edition July 2009

Revised August 2011

Revised June 2012

Revised September 2012

Revised September 2013

## I. INSPECTION AND ACCREDITATION POLICY

### A. The NAME Inspection and Accreditation Program

The National Association of Medical Examiners (NAME) Inspection and Accreditation Program has the explicit purpose of improving the quality of the forensic/medicolegal investigation of death. NAME Accreditation applies to forensic death investigation systems/offices as entities and does not apply to individual practitioners. Facilities are only part of each system and NAME does not accredit facilities alone.

The accreditation standards emphasize policies and procedures, not professional work product. The accreditation standards represent minimum standards for an adequate medicolegal death investigation system, not guidelines. NAME accreditation is an endorsement by NAME that the system or office provides an adequate environment in which a medical examiner/forensic pathologist may practice his or her profession, and provides reasonable assurances that the office or system well serves its jurisdiction. NAME accreditation is not a guarantee of proper medicolegal death investigation or forensic pathology diagnoses.

It is the goal of NAME that application of these accreditation standards will aid materially in developing and maintaining a high caliber of forensic/medicolegal death investigation for the communities and jurisdictions in which they operate.

The NAME Inspection and Accreditation Program is a peer review system. A goal is to improve office or system performance through objective evaluation and constructive criticism. NAME accreditation standards are embodied in the Inspection Checklist. The Inspector interprets and applies the checklist item to the office situation. The Inspector is also the medical examiner's peer and serves as an expert guest consultant to the system or office.

The NAME Inspection and Accreditation Program is intended to evolve over time. Procedures ensure the review of standards and procedures and a mechanism is established for setting standards. The NAME Inspection and Accreditation Program is overseen by the NAME Standards, Inspection, and Accreditation Committee, but changes to the Program must be approved by the NAME Board of Directors.

A NAME Accreditation Inspection is different from a NAME Audit. Such an audit is a special review and is not performed for the purpose of accreditation. An office or jurisdiction may request NAME to provide an external audit of its medicolegal death investigation system. Audits are addressed by a separate NAME policy.

### B. Applicability

#### 1. Medical Examiner Offices

The Inspection Checklist universally applies to large and small jurisdictions and all types of medical examiner offices.

#### 2. Coroner Offices

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Coroner offices may apply for inspection and accreditation. They must meet all of the same applicable accreditation standards as medical examiner offices. Coroners or coroner's pathologists, as office chiefs (or equivalent titles), must meet the personnel requirements of chief medical examiners (or equivalent medical examiner titles).

## 3. Medical Examiner Systems

Medical Examiner systems may apply for accreditation, but if the system has satellite offices where autopsies are performed, then each such element must also be inspected (on-site inspection of each separate facility/satellite office) and the application fee will be accordingly adjusted. Offices that are part of systems may request individual accreditation. Where all the satellite offices are individually accredited, a certificate of accreditation for the entire system may be issued.

### C. The Inspection Checklist

#### 1. Checklist Items as Accreditation Standards

NAME accreditation standards are embodied in the Inspection Checklist. NAME has also established Forensic Autopsy Performance Standards in addition to those standards embodied in the Inspection Checklist. There is significant overlap between the two, but they are not the same.

The Inspection Checklist provides a realistic assessment of the quality of an office or system operation. The Inspection Checklist questions are used during an inspection to evaluate whether or not the system/office meets the NAME Standards for Accreditation.

#### 2. Checklist Format

The checklist question format is designed to provide objectivity, assist preparations for accreditation, promote clarity and eliminate discrepancies that accrue from the use of multiple documents, force critical review of specific policies and practices, and provide a basis for statistical support.

Each question is uniquely numbered, worded, and designed to produce a "Yes," "No," or "N/A" (not applicable) response. A "No" response indicates the finding of a deficiency. Each question bears a designation of Phase I or Phase II, respectively.

Phase I standards are not absolutely essential requirements; deficiencies will not directly and seriously affect the quality of work or significantly endanger the welfare of the public or personnel.

Phase II standards are considered essential requirements; any such deficiencies may seriously impact the work or adversely affect the health and safety of the public or agency staff.

#### 3. Deficiencies Allowed

An inspection finding of no more than fifteen (15) Phase I deficiencies and no (0) phase II deficiencies is required for full accreditation. Provisional accreditation may be conferred for a twelve (12) month period if the office has no more than twenty-five (25) Phase I and no more than five (5) Phase II deficiencies.

## 4. Checklist Version

The system/office applying for NAME inspection is expected to conduct a self-inspection using a version of the Inspection Checklist that is current at, or was in effect during the six-month period immediately prior to, the time of application for inspection. If a new Inspection Checklist has been adopted by the NAME Board of Directors between the time the application and the time of the NAME on-site inspection, the system/office may opt to apply any individual checklist item from either the version under which application for inspection was made or the more current version. The checklist version that is worded in such a way or has a phase designation that favors a "yes" response and/or favors a higher accreditation status for the system/office being inspected should be used.

## 5. External Ancillary Services

The design of the checklist recognizes that a medicolegal death investigation system has many parts and is larger than the medical examiner (or coroner) office itself or any individual agency or organization providing medicolegal death investigation services. The inspection and the Inspection Checklist address the system as a whole (the "bigger picture"). For example, it is rare for a medical examiner office to have its own microbiology laboratory. The accreditation standards do not require an in-house microbiology laboratory but do require office/system access to microbiology services and that the microbiology laboratory used be accredited. Although such external ancillary services become part of the system being inspected, NAME does not intend to micromanage such entities; instead an inspector should apply a rule of reason. Thus, in the case of an out-of-house toxicology laboratory, the checklist items (standards) for toxicology staffing, space, and chemical storage would not be applicable ("N/A" for checklist use purposes), but other toxicology-area standards (other checklist items) such as accreditation of the laboratory and certification of the toxicologist do apply. Lack of accreditation or certification in the toxicology area would be identified as a deficiency (marked "No" on the Inspection Checklist).

## D. Inspectors

### 1. Certified NAME Inspectors

The NAME Inspection and Accreditation Program is a peer review system. All Principal Inspectors are to be Fellows of the Association (Board Certified forensic pathologists) who have been specifically trained and certified in the accreditation process as described below (section D.3). Principal Inspectors will also be required to either come from currently accredited offices (full or provisional) or be a current member of the SI&A parent committee or one of the SI&A subcommittees. Accredited offices/systems may be required to have one or more forensic pathologists trained/certified as an Inspector and conduct one or more inspections.

All certified inspectors and members of the SI&A committee or subcommittees will be required to sign a confidentiality agreement binding them to not disclose the content of an inspection outside of the official NAME inspection process detailed herein.

### 2. Inspector Discretion

Inspectors are representatives of NAME and should strive for objective, dispassionate critiques. Participating facilities should expect a thorough and fair inspection. Overlooking deficiencies that seem

minor should not be regarded as a favor to the medical examiner. Most facilities spend considerable time and energy preparing for the inspection and sincerely appreciate a comprehensive inspection.

The NAME Standards, Inspection and Accreditation Committee relies heavily on the Inspector's judgment, which is impossible to standardize. Inspectors are given appropriate discretion and sufficient latitude to permit flexibility and judgment in the application of a question to a given office situation. The "not applicable" option is particularly important in this regard. This flexibility is the key to the universal application of the NAME Inspection and Accreditation Program to various offices.

A conscientious Inspector will occasionally have difficulty deciding whether a Checklist item should be marked "Yes" or "No"; this usually occurs in situations of partial compliance (and thus partial noncompliance) with the wording of the question. In some cases, there may be doubt as to whether the item actually applies to the specific facility being inspected. The Inspector must use discretion. Often, such Checklist items should be answered "N/A" (Not Applicable), and the special circumstances should be noted in the Inspector's Report.

Inspectors may consult the Chair of the NAME Standards, Inspection, and Accreditation Committee for advice and guidance by telephone or email. Formal questions about checklists may be forwarded by the Inspector and/or the applicant office to the Chair of the NAME Standards, Inspection and Accreditation Committee with a copy to the NAME office.

### 3. Inspector Training Workshops and Inspector Certification

The NAME Standards, Inspection and Accreditation Committee will conduct Inspectors Training Workshops at Annual NAME Meetings and otherwise as necessary. Successful completion of a workshop and performing a ride along with a certified inspector shall qualify ("certify") an individual to serve as a NAME Certified inspector for accreditation purposes. Staff from accredited offices and systems, as well as those seeking or considering accreditation, are strongly urged to participate in such workshops and/or programs.

### 4. Secondary Inspectors

Larger offices may require sending more than one inspector in order to efficiently complete the inspection. The secondary inspector(s) will also be a Certified NAME Inspector as defined above. In addition, Investigator Affiliate or Administrative Affiliate members of the Association may be utilized as secondary inspectors in offices containing a large investigative or administrative unit. The decision to utilize secondary inspectors will be made by the Chair of the SI&A Committee after consultation with the primary inspector and the inspected office.

### 5. Ride along inspectors

Fellows and Affiliates in the Association will be required to ride along with a certified inspector on a NAME inspection prior to being qualified to become a Certified Inspector as defined above. Expenses for travel and lodging for ride along inspectors will be borne by the Fellow or Affiliate and not by NAME.

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## E. Accreditation Standards Setting

### 1. Adoption of the NAME Program

NAME has attempted previous accreditation programs. The current program evolved from this prior experience and test trial inspections, and was vetted through several rounds of amendment and approval by the NAME Board of Directors and the general membership prior to adoption.

### 2. Periodic Accreditation Standards Review

The NAME Standards, Inspection and Accreditation Committee shall annually review the existing Inspection Checklist, the Inspection and Accreditation Policies and Procedures Manual, and the Forensic Autopsy Performance Standards.

Responses to Inspection Checklists and surveys will be compiled in computerized files and used to justify or amend Inspection Checklist standards and for other legitimate purposes of NAME. Commentaries and recommendations will also be archived for consideration of improving the accreditation standards and procedures.

Each member of the NAME Standards, Inspection and Accreditation Committee, at the beginning of each new term of the Committee, shall download and review from the NAME website:

- The NAME Inspection and Accreditation Policies and Procedures Manual
- The Inspection Checklist
- The Autopsy Practice Standards

### 3. Amendments

The Chair of the NAME Standards, Inspection and Accreditation Committee, after consultation with the members of the NAME Standards, Inspection and Accreditation Committee, may recommend to the NAME Board of Directors amendments to the NAME Inspection Checklist and NAME Inspection and Accreditation Policies and Procedures Manual for adoption.

General members, Board of Directors members, and executive staff may also propose amendments for consideration to the NAME Inspection and Accreditation Committee or the NAME Board of Directors.

Proposed changes must be sent to each member of the Board at least two weeks prior to the Board meeting at which the changes will be considered for adoption.

The NAME Board of Directors may adopt the amendments to the Inspection and Accreditation Program by a simple majority vote.

Amendments to the Forensic Autopsy Performance Standards require a simple majority vote of the membership at the annual business meeting.

### 4. Sunset of Inspection Checklist



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The effective period of the NAME Inspection Checklist will be six (6) years. The date of issuance and expiration of the Inspection Checklist will be published. The NAME Standards, Inspection and Accreditation Committee or other designated committee must review the Checklist and bring to the NAME Board of Directors a recommendation to reissue the current Inspection Checklist or a substitute document before the expiration date. The Committee will review the Inspection and Accreditation Commentary file during its review process.

## F. Fees

Effective January 1, 2013 the following Inspection and Accreditation Fee Structure will be: Offices under 2 million in population will pay \$3,500 first year and \$1000/year for the next four years. Offices over 2 million in population will pay \$7,000 first year and \$2000/year for the next four years. Individual offices within a larger system will be inspected and treated as individual offices.

Fees are subject to change and are set by the NAME Executive Committee.

## G. Procedures

### 1. Pre-Inspection Preparation

NAME strongly recommends a substantial period of preparation for accreditation prior to application for NAME inspection. A copy of this Inspections and Accreditations Policies and Procedures Manual and a copy of the NAME Inspection Checklist should be obtained from the NAME web site for the purpose of preparation. The chief medical examiner (or equivalent in Coroner systems) should distribute the Inspection Checklist to the office staff. After a critical self-inspection, any deficiencies noted can be, and should be to the extent possible, corrected before application.

### 2. Pre-inspection Consultation

An office contemplating inspection or re-inspection may request a Pre-Inspection Consultation. The Chair of the NAME Standards, Inspection, and Accreditation Committee may agree to appoint a Consultant Inspector to visit the requesting office to perform a pre-inspection consultation. This consultation may serve to identify potential obstacles to successful accreditation and to guide an office in its preparations to undergo inspection. A Pre-Inspection Consultation is not a substitute for the Self Inspection process required as part of application for formal inspection for accreditation purposes.

A fee shall be paid by the office to NAME for the pre-inspection consultation. The fee shall be the same as a formal initial NAME inspection for accreditation, which includes/covers the inspector expenses (inspector expenses are reimbursed to the inspector directly by NAME). Fees are established by the NAME Executive Committee.

Accreditation will not be conferred on the basis of a Pre-Inspection Consultation, and the Consultant/Inspector may not serve as the Inspector for that office's regular inspection, but may serve as the Inspector at a later time after at least one cycle of successful accreditation.

### 3. Application

Application for inspection is accomplished online as follows:

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- 1) Log into the I&A System: <http://ina.orainc.com>
- 2) Click on "My Office" (top menu)
- 3) Review (or complete) both checklist and office survey (update as needed)
- 4) SAVE
- 5) Verify that you have completed the reviews by clicking the appropriate boxes (on "Status" page).
- 6) Click the "Submit to NAME" button.

## 4. Submission of Completed Application and Fee

Once the office has entered all information into the online system and submitted the application, the online system will be locked down for view by the office. At that point, only members of the SI&A committee, the inspector, the designated inspection reviewer, the NAME Executive Director and ORA staff will be able to view the document.

NAME will receive confirmation that the office has submitted complete Inspection and Accreditation materials and an invoice will be sent electronically. After payment of the invoice an inspector will be assigned.

## 5. External Inspection (On-Site Inspection)

### a) *Appointment of an Inspector*

The Chair of the NAME Standards, Inspection and Accreditation Committee will appoint an Inspector within six (6) weeks of notice of the receipt of the completed application materials and payment of the fee or will contact the applicant to explain the reason for the delay. The Inspector will be a board-certified forensic pathologist, preferably affiliated with an accredited system/office. The Inspector must be Certified as described above (section D.3). An applicant may not request that the inspector be a particular individual.

If the applicant or the appointed inspector has any concern about potential conflict or any reservation about the appropriateness of the inspector appointment, these should be communicated directly to the Chair of the NAME Standards, Inspection and Accreditation Committee as early as possible in the inspection process to allow appointment of a different inspector. If the Inspector is not satisfactory to the Applicant before an inspection, another shall be appointed. An Applicant will not be permitted more than two recusals of the appointed Inspector.

After appointment of an Inspector, the date of the inspection will be set after coordination by the Inspector and the Applicant. The Inspector shall inform the Chair of the NAME Standards, Inspection and Accreditation Committee and the Executive Director of NAME of the agreed upon date of inspection.

Any problems encountered in scheduling inspections should be brought to the attention of the NAME staff who will inform the Chair of the NAME Standards, Inspection and Accreditation Committee.

Once an inspection date has been established, an office/system may be granted a delay in inspection if a compelling reason exists. However, if the delay results in the Applicant's accreditation period ending prior to on-site inspection, the office or system will not be considered accredited after the end date of the current accreditation period.

## *b) Local arrangements*

After the date of the external inspection has been set, the Inspector shall make travel and lodging arrangements in compliance with the current NAME travel policy. The Inspector may contact the Applicant for suggestions regarding lodging and ground transportation.

## *c) Inspection*

The Inspector will conduct an on-site inspection on the date(s) set by NAME. The inspection will be conducted as expeditiously as possible, but will take as long as necessary to complete to the satisfaction of the Inspector. All offices, systems, and facilities differ; therefore it is impossible to provide a rigid blueprint for an inspection. Most on-site inspections require one or two days.

The Inspection Checklist provides the framework and detail for the inspection as well as criteria by which an office or system is assessed. The Inspector should be thoroughly familiar with the contents of the Inspection Checklist.

The Inspector should arrive to begin the inspection process at the designated time. Generally, the inspection will begin with a brief introduction to the chief medical examiner and his or her staff. The office may wish to begin with a brief introductory overview of the operation. An initial walk-through of the entire facility is recommended to afford the Inspector an opportunity to become familiar with facility operations and key personnel.

The Applicant must provide an office or private area in which the Inspector can work.

The Inspector will systematically examine in detail each question on the Inspection Checklist with the chief medical examiner (or equivalent position/title) or his or her representative. The chief medical examiner (or equivalent) must be available to respond to questions of the Inspector.

The Inspector will request appropriate documentation and other tangible evidence of compliance and the office or system is expected to provide it. The Inspector may request that some materials be provided by the office beforehand to facilitate and expedite the inspection. Policies for an office or system may be adopted from a higher authority or source (e.g. county personnel policy, state law), but offices must have copies available to demonstrate documentation of compliance with NAME accreditation standards.

The Applicant must respond, in some fashion, to all requests for demonstration of compliance. Noncompliance with NAME accreditation standards will be assumed in the absence of documentation or demonstration of compliance.

The Inspector may request time alone to more thoroughly review any policy manuals or documents. The Inspector may request individual interviews with various staff members. The Inspector should set aside time to confer privately with the Chief Medical Examiner (or equivalent) to discuss areas not otherwise adequately addressed, any difficulties, and the overall inspection.

It is the Inspector's responsibility to ensure that the Inspector's Report and the Inspection Checklist are completed appropriately. The name of the Inspector and the inspection date must be recorded in the

online system. A response must be checked for each question: yes "Y", no "N", or not applicable "N/A". Only one response may be checked for any question, and no question may be left unanswered. Only checked responses will appear on the Deficiency Commentary. Comments may be made in the comment box. Comments must be made for all "N" or "N/A" responses. The Inspector may note in his or her report that he or she has marked a specific question "yes" with certain assumptions or reservations. Any pertinent comments that should be reviewed by the NAME Standards, Inspection and Accreditation Committee must be included in the Inspector's Report, not on the checklist.

Online versions of the checklist and inspection report may be used by the inspector in lieu of hard copies (such as using a netbook or iPad with wireless access to the online system). If hard copies are used during the inspection, the information must then be transferred to the online system for submission.

Deficiencies should be presented factually with recommendations for improvement. A negative, unduly critical, or punitive attitude is offensive and defeats the purpose of the program. It should be recognized that the medical examiner is the Inspector's peer. Deficiencies cited are sometimes challenged on the basis of a difference in interpretation. Such dialogue is healthy and is one of the strengths of the program. The medical examiner may be reminded that he or she will have the opportunity to respond in writing to a disputed finding and that NAME will adjudicate the challenge.

During an inspection, the Chief Medical Examiner (or equivalent) or his or her representative has the opportunity to fully express his or her views and may attempt to persuade the Inspector that a question may be properly marked "Yes" or "N/A" rather than a "No", a deficiency. The Inspector must exercise good and fair judgment in the discharge of his or her duties. An Inspector is free to comment on any opinion in his or her Inspection Report.

In some cases, it may be possible for the office or system to correct deficiencies before the on-site inspection ends. Provided there is adequate documentation, this is acceptable and encouraged. Checklists should not be marked as deficiencies for such questions.

Aside from the summation conference, the inspection concludes with completion of the entire Inspection Checklist. The findings of the inspection should be reviewed with the chief medical examiner (or equivalent) and other appropriate staff.

#### *d) Summation Conference*

The Inspector will hold a summation conference at the conclusion of the inspection.

The summation conference is one of the most important components of the inspection and must not be curtailed, even if necessary to extend the inspection an additional day NAME recommends attendance of the entire professional medical examiner staff at this conference.

The conference should open with a short review of the objectives of the NAME Accreditation Program. Although the Inspector may neither grant nor deny accreditation at this meeting, it is important to present ALL deficiencies that will be reported in the Inspection Report.

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The Inspector shall list and discuss all Phase I or Phase II deficiencies with the Chief Medical Examiner (or equivalent). This allows the system/office to begin correcting deficiencies immediately. There should be no surprises in the final Inspection Report.

An essential part of peer review is education. The summation conference is an appropriate time for the Inspector to discuss suggestions for improvement of the facility or the operations.

Applicant questions about Inspection Checklist items, particularly differences in interpretation of specific Checklist items, should be discussed in the constructive forum atmosphere of the Summation Conference. The inspector should avoid confrontation. Unresolved questions and areas of disagreement will be documented in the Inspection Report. The Chair of the NAME Standards, Inspection and Accreditation Committee will review and resolve these issues, and the Applicant office will have an opportunity to provide a written response.

The Inspector will direct the Chief Medical Examiner (or equivalent) to fill out the online post-inspection questionnaire. Accreditation will not be conferred until this document is received by NAME. The questionnaire is an opportunity for the Applicant to comment on the inspection and the accreditation process, including the Inspection Checklist and the Inspector. The post-inspection questionnaire and any comments, suggestions, and criticisms will be filed in the Commentary File for consideration by the Committee on Standards, Inspection and Accreditation.

### *e) Meeting with Responsible Officials*

Officials with oversight responsibility for the office or system should be present at the Summation Conference, if possible. The Inspector will make every effort to meet with and present findings to these officials if they are not present at the Summation Conference.

### *f) Inspection Report*

The Inspector will submit a narrative Inspection Report online within thirty (30) calendar days after the inspection. This report will be generated in Microsoft Word and will be uploaded to the ORA system. The report is a summary of the inspection and the online checklist is not to be used as a substitute for this report.

The Report shall include the following elements:

- The name of the office/system.
- The name of the Chief Medical Examiner (or person[s] with equivalent status/title).
- The name of the Inspector.
- The date(s) of the inspection.
- A brief description of the office/system, to include type of system (or part of system) (city or county or district or state, medical examiner or coroner, autopsy service, satellite office, etc.), approximate population and land area served, major cities within the jurisdiction and other general descriptors.
- The checklist version(s) used for the inspection.
- A statement as to the total number (or absence) of Phase I and total number (or absence) of Phase II deficiencies.

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- A list of all Phase I deficiencies (if any), all Phase II deficiencies (if any) and all Not Applicable (N/A) items, each by the checklist item number and letter. Each listed checklist deficiency or "N/A" response is to be accompanied by a brief explanation.
- A statement(s) regarding any area of the office that the inspector feels is borderline with regard to meeting a standard at the time of the inspection or that is likely to not meet the standard in the near future (or by the time of the next on-site inspection).
- A statement(s) regarding any area of the office that the inspector feels is outstanding or especially noteworthy.
- A recommendation for full accreditation, provisional accreditation, or non-accreditation.
- The date the report is completed and the signature of the inspector.

The Inspector has discretion to offer a written opinion or description of any aspect of the office or system that he or she believes is pertinent to the content and conclusions of the Report. All applicable official comments must be made in the Inspection Report rather than handwritten on the Checklist itself. It is useful to indicate when an office or system is in partial compliance with regard to any particular checklist item receiving a "No" response.

Thoughts and comments that relate to the Accreditation Checklist itself should not be included in the Inspection Report, but should be brought to the attention of the Standards, Inspection, and Accreditation Committee by separate means.

If for any reason the Inspector believes that there is a fundamental disparity between the intent of the Accreditation Checklist and the function or role of the Applicant office or the role of the chief medical examiner or staff, it should be recorded in the Inspection Report. The Inspector's comments are pivotal if denial or provisional accreditation is being considered. These comments may also be a basis for modifying the Inspection Checklist.

### *g) Inspection Review*

Following the submission of the inspection checklist and report by the inspector, the online inspection materials will be made available to all members of the NAME Standards, Inspection and Accreditation Committee by the Executive Director or designated support staff. The Executive Director will update the committee on progress of inspections to ensure "transparency" of process and foster consistency of the reporting and the reviews.

ORA staff will ensure that the original inspection materials as entered by the office and the inspector are not modified after submission.

The Chair of the NAME Standards, Inspection and Accreditation Committee will then select one other member of the NAME Standards, Inspection and Accreditation Committee (selected by rotation through the roster of all members of the committee) who will officially review the Inspection Report and Checklist. The reviewer will be notified by the Executive Director of NAME using e-mail notification. Any member of the committee may make comments about the report and/or checklist to the Chair, the official member reviewer, or to the committee as a whole, but such comments are not required. These comments should be confined to the committee and are considered unofficial.

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The Chair and/or the official reviewing committee member shall contact the inspector if there are any questions regarding the Inspection Report or Checklist, or the possible need for clarification of any aspect of the inspection.

The official review is to be completed within fifteen (15) working days of the filing of the Inspection Report, unless a protest (based on the information provided during the Summation Conference) has been filed by the office/system. The status and date will be noted in the official NAME files.

Once the official committee reviewer is satisfied with the report and checklist (and any clarifications as needed), the member is to notify the Chair. If the reviewing committee member and the Chair both accept the Inspection Report and recommendation for accreditation status (full, provisional, or non-accreditation), the review shall be considered complete and accreditation status conferred based on the Inspector's recommendation.

If (and only if) the Chair and the official reviewing committee member do not agree on the appropriate accreditation status for the office/system under review, the matter shall go before the NAME Standards, Inspection, and Accreditation Committee as a whole as soon as practical for discussion and vote. A simple majority vote will decide the accreditation status to be conferred.

Once the review process is complete, the NAME Executive Director will confirm that the post-inspection survey document has been completed by the inspected office. Once the post-inspection survey has been received, a letter will be issued within 10 (ten) business days by the NAME Executive Director to the office/system officially notifying the office/system of its accreditation status (a congratulatory letter if full or provisional accreditation is conferred or a letter of official notice of non-accreditation). The letter will be accompanied by a copy of the official inspection report, transferred from the document issued by the inspector to official NAME letterhead. The final date of the onsite inspection marks the beginning of the accreditation period or non-accreditation for that office/system.

For offices/systems granted full accreditation status, an official NAME Accreditation Certificate is prepared, signed by NAME officials (see below) and delivered to the office/system as soon as practical.

### 6. Accreditation

#### a) *Full Accreditation*

Accreditation Certificates are issued to the office or system and signed by the NAME Inspector, the Chair of the NAME Standards, Inspection and Accreditation Committee, the Secretary-Treasurer and the NAME President. The Certificate of Accreditation will include the date upon which the accreditation is conferred and the date of expiration.

Full accreditation is conferred if NAME determines that the office or system has no more than fifteen (15) Phase I deficiencies and no (0) Phase II deficiencies.

Full accreditation is conferred for a maximum period of five (5) years from the date of the Accreditation Certificate.

#### b) *Provisional Accreditation*

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Provisional accreditation status can be conferred for a period of twelve (12) months if an office or system fails to achieve sufficiently few deficiencies for full accreditation but has no more than twenty-five (25) Phase I and no more than five (5) Phase II deficiencies.

Provisional accreditation may be extended for up to four (4) subsequent sequential twelve (12) month periods, each upon separate written application prior to the end of each twelve (12) month period and proof to the satisfaction of the Chair of the NAME Standards, Inspection and Accreditation Committee that there have been and are ongoing efforts to address deficiencies that continue to foreclose full accreditation.

If an office/system holding provisional accreditation status does not make written application for extension of the provisional accreditation prior to the end of any twelve (12) month period (initial period or any period of extension), the accreditation will automatically lapse. The office/system will then be non-accredited and will have to reapply for inspection for accreditation. Such application may not be made for at least six (6) months from the time non-accredited status begins (end of the provisional status period).

NAME will send a written Notice of Extension of Provisional Accreditation to the office or system within five (5) working days of the approval of extension of provisional accreditation and retain a copy. The provisional accreditation period for any twelve-month extension begins as of the date (day and month) of the issuance of the first (original) notice of conferment of provisional accreditation status following the on-site external inspection (first/original external inspection).

The office/applicant may request conversion to full accreditation status at any time. Such requests must be made in writing and are to be accompanied by written or photographic documentation that the necessary deficiencies have been corrected or addressed. This status conversion request package will then be sent to the Chair of the SI&A Committee and the original Inspector. The Inspector will discuss the request with, and make a recommendation to, the Chair to approve or deny conversion to full accreditation status.

NAME reserves the right to require an on-site follow-up inspection to verify the elimination of deficiencies at the expense of the Applicant.

The Chair will then make a determination of the accreditation status. The full Standards, Inspection and Accreditation Committee will be consulted if a difference in opinion as to appropriate accreditation status exists between the original Inspector and the SI&A Chair.

If a decision is made to convert the office from Provisional to Full accreditation, a written report will be submitted by the original Inspector to the NAME office detailing the original inspection deficiencies, the means of correction and the final remaining (if any) deficiencies. The report will conclude with a statement indicating that the office is to be advanced to Full Accreditation status. The NAME office will place the report on official NAME letterhead and forward the report, along with a congratulatory letter from the Chair, to the office. A certificate of full accreditation will then be issued. The status of full accreditation granted in this manner shall be conferred for a period equal to, but not beyond, five years from the original on-site external inspection (not five years from the date that full accreditation is granted following a period of provisional status). If full accreditation is denied, the applicant will be



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immediately notified to permit further corrective actions before the expiration of the period of provisional accreditation.

The applicant may appeal the determination of status conversion by procedures described in Section III.

Provisional status may or may not be extended by the Chair of the NAME Standards, Inspection and Accreditation Committee during the resolution of the above actions.

### *c) Non-Accreditation*

If the office or system is found to have more than twenty-five (25) Phase I deficiencies or more than five (5) Phase II deficiencies, NAME will not accredit the office or system.

The office or system will be non-accredited if the provisional period(s) has expired (no further provisional-period extensions granted) and the office or system has failed to reduce the deficiencies to fifteen (15) Phase I deficiencies and no (0) Phase II deficiencies.

NAME will send a written Notice of Non-Accreditation to the office or system within five (5) working days of the determination of non-accreditation and retain a copy. Non-accreditation will be considered to have begun as of the date of the issuance of this Notice.

An office cannot reapply for accreditation for a period of six (6) months after a Notice of Non-Accreditation has been issued.

## 7. Maintenance of Accreditation

For offices/systems that hold full accreditation status, a 60 day reminder of annual renewal will be sent electronically. If no response is received, a certified letter will be sent 10 days prior to lapse. The letter will contain language detailing the potential penalty for not meeting maintenance deadlines. The office must then complete the maintenance of accreditation form online and pay the maintenance fee. Failure to complete the online maintenance of accreditation or failure to pay the maintenance of accreditation fee prior to the date (month and day) of the original accreditation certificate shall result in loss of accreditation status (accreditation will automatically lapse).

Offices/s systems holding provisional accreditation status must submit an electronic request to [name@thename.org](mailto:name@thename.org) for extension of provisional accreditation prior to the end of the twelve (12) month provisional accreditation period. Failure to submit a written request for extension of provisional accreditation status or failure to pay the maintenance of accreditation fee shall result in loss of accreditation status (accreditation will automatically lapse).

Lapse of accreditation will result in the office/system having to pay the initial inspection fee as described above (section F).

## B. Annual Review

For offices holding Full Accreditation, the online maintenance of accreditation document will require attestation of the lack of any major changes to the office since the inspection. A reviewer will be assigned (which may be the original inspector) who will review the online document and inform the

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NAME office that either the annual review is acceptable or that there are discrepancies or concerns. If concerns are stated, they will be immediately referred to the Chair of the SI&A committee for review and action. If no concerns are stated, the office will receive notification from the NAME Executive Director that the annual review was accepted.

For offices holding Provisional Accreditation, the online maintenance of accreditation document will also require attestation of the lack of any major changes to the office since the inspection. In addition, documentation of substantial progress toward remediation of the stated deficiencies must be received, either by narrative description or photographic evidence. A reviewer will be assigned (which may be the original inspector) who will review the online document and inform the NAME office that either the annual review is acceptable or that there are discrepancies or concerns. An office failing to address deficiencies in a manner deemed acceptable will be cause to recommend revocation of the Provisional Accreditation. If concerns are stated, they will be immediately referred to the Chair of the SI&A committee for review and action. If no concerns are stated, the office will receive notification from the NAME Executive Director that the annual review was accepted.

ORA staff will ensure that the online system maintains the original comments of the onsite inspector throughout the accreditation cycle, including all narrative reports.

### 9. Major Changes in Accredited Offices

The accredited office must notify the NAME Standards, Inspection, and Accreditation Committee if, during an office's accreditation or provisional accreditation term, there occurs any substantial change in staffing, leadership, policy, facilities, resources or any other change that would bring about one or more Phase II deficiencies for any significant, prolonged, or indefinite time.

If any member of the SI&A committee is made aware of such a change which has not been reported, the matter will be immediately be brought to the attention of the Chair of the SI&A committee who will communicate this to the committee as a whole.

In response, the Committee may suspend or revoke accreditation or may place the office in a "provisionally accredited" status until all deficiencies have been rectified. Such decision will be by a majority vote. NAME may, at the option of the Chair of the Standards, Inspection, and Accreditation Committee, require an on-site re-inspection of the office before reinstating accreditation. The inspected office will be assessed an additional initial inspection fee as described above (section F).

### 10. Application for Renewal

Application for new inspection and renewal of accreditation must be made prior to expiration of the current accreditation period. If all application materials have been submitted, and the inspection fee has been paid to NAME, the current accreditation status will continue until the end date of the period of current accreditation or the date of the external on-site inspection, whichever comes first.

If application for new inspection and renewal of accreditation has been made and either the date of expiration of the current accreditation period or the date of the external inspection has been reached, the accreditation status shall automatically change to "accredited, current inspection in progress" (to be listed as "inspection in progress" for practical purposes).

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If the end date of the current period of accreditation is reached and application for new inspection/renewal of accreditation has not been made, the accreditation status of the system/office shall automatically change to "accreditation lapsed." Reapplication must then be made as described above (section G.3) with payment of fees for a lapsed accreditation as described above (section F).

## H. Appeals

Appeals to an inspector's and/or reviewer's findings may be lodged by written submission to NAME within ten (10) working days of the issuance of a Notice of Provisional Accreditation or Non-Accreditation. A copy of the written appeal will be immediately sent to the Chair of the NAME Standards, Inspection and Accreditation Committee. The chair may bring the question to the Standards, Inspection, and Accreditation Committee. The chair may also consider conducting another onsite inspection. If resolution still cannot be achieved, the appeal may be brought to the NAME Board of Directors for a vote. In any event, resolution must be achieved within nine (9) months; otherwise unresolved issues will be settled in accordance with the findings of the Inspector.

The resolution must be reduced to a written Letter of Response to an Applicant's appeal sent to the Applicant within ten (10) working days of resolution.

An Applicant may challenge this response, but the subsequent NAME letter of response to this challenge will be considered final and dispositive of the issue. The applicant may reapply for inspection and accreditation.

## I. Period of Accreditation

Accreditation is conferred for a maximum period of five (5) years per on-site inspection, however the accreditation period may be curtailed if a significant change in the program occurs, the certificate is not maintained, or a fee is not paid.

## J. Miscellaneous

### 1. Records Administration

All Inspection and Accreditation materials will be archived for a period of at least six (6) years. Data from survey instruments and Accreditation Checklists will be entered into a computerized data system. NAME shall maintain a current roster of accredited offices and systems.

### 2. Computerization of Checklist and Survey Data

The Accreditation Checklist and Demographic Survey data will be entered into a computer and compiled annually and as needed. The compiled statistical data will be provided to the Chair and every member of each newly assembled NAME Standards, Inspection and Accreditation Committee. NAME may publicize the compiled statistics.

### 3. Commentary File

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A file will be kept at the NAME office of all commentary, complaints, and recommendations made regarding the Accreditation Checklist and the inspection process. These files will include the returned post-inspection questionnaires. Copies of such information received will be forwarded to the Chair of the NAME Standards, Inspection and Accreditation Committee upon appointment.

## 4. Annual Reports

The Chair of the NAME Standards, Inspection and Accreditation Committee will report to the NAME Board of Directors at each annual meeting. The report shall include the name of each Applicant, the status of each accreditation action, and a roster of currently accredited offices and systems.

## 5. Publication of Accredited Offices and Systems

The roster of currently accredited (full and provisional status) offices and systems will be made public (including, but not limited to, being posted on the NAME website).

## K. Available Information

All inquiries should be directed to:

The National Association of Medical Examiners  
Attn: Inspections & Accreditation  
31479 Arrow Lane  
Marceline, MO 64658  
Off: (660) 734-1891  
FAX: (888) 370-4839  
name@thename.org

Materials available from the NAME Website [www.thename.org](http://www.thename.org) include:

- NAME By-Laws
- NAME membership directory
- Roster of positions and appointments
- NAME Inspection Checklist
- NAME Inspection and Accreditation Fee Schedule
- NAME Forensic Autopsy Performance Standards
- NAME Inspection and Accreditation Policies and Procedures Manual

Specific inquiries on inspection and accreditation can be made of the current Chair of the NAME Standards, Inspection and Accreditation Committee.

Accredited offices/systems and Applicants may receive copies of their inspection and accreditation materials (copies of official inspection checklist and inspector's report) for their review from the ORA web site at any time following, but not before, the formal review by the NAME Standards, Inspection and Accreditation Committee has been completed. Hard copies will be printed by the Executive Director of NAME and will remain on file in the NAME office.

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### L. Schema of I&A Process

Who?	What?	How?	To where?	When?
Applicant	Request	Electronic or mail	NAME	-----
NAME	Send application packet	Electronic or mail	Applicant	10 days
Applicant	Self inspection	Hard copy or electronic	-----	-----
Applicant	Complete application Send forms and fee	Electronic or mail	NAME	-----
NAME	Check completeness Notify Chair	e-mail or phone	Chair	5 days
Chair	Appoint inspector	e-mail or phone	Applicant Inspector NAME	6 weeks
NAME	Coordinate date	e-mail or phone	Inspector Applicant	-----
NAME	Notice of Inspection	e-mail or phone	Applicant Inspector Chair	5 days
Applicant	Local arrangements	e-mail or phone	Inspector Local accommodations NAME	5 days
Inspector	Conduct inspection Summation conference Meet with officials File inspection report	Electronic or mail	NAME	30 days
Applicant	Questionnaire	Electronic or mail	NAME	-----
NAME	Distribute report	Electronic or mail	Applicant Chair	5 days
Chair Member reviewer	Complete inspection review and approve accreditation	e-mail or phone	NAME	15 days
NAME	Issue certificate	Carrier	Inspector Chair President Secretary-Treasurer NAME Applicant	30 days
Applicant	Request for Maintenance of Accreditation or Extension of Provisional Accreditation Status	Written, by mail	NAME	Annual

## II. NAME AUDITS

### A. Purpose

Official NAME audits differ from Accreditation Inspections. The purpose of NAME audits is not to assess compliance of the minimal standards of the Inspection and Accreditation program, but rather to more globally evaluate an office using a systems approach in order to apply the wisdom of NAME leadership to correct problems or give advice for improvement.

### B. Initiation

Offices may request NAME to conduct an audit of their office or their system. A written letter of request should be directed to the NAME Executive Director.

### C. Types of Audits

In addition to the usual full audit, an Emergency Audit or a Special Audit may be requested but require approval of the NAME President and will require individual negotiation on a case-by-case basis.

### D. Audit Team

Official NAME audits will be conducted by a team of at least three NAME Fellows. A NAME Audit Team Leader will be designated. Consideration should also be given to including an administrator, a medicolegal death investigator, a toxicologist and other specialists depending upon the functional areas of the office. The jurisdiction being audited may request that specific individuals either be included or excluded, but they may not designate an entire team and the final composition must be approved by the NAME President.

### E. Fees

The charge for the Audit will vary by size of the team and the number of days of visitation (minimum of two days) at a rate of \$1,500/person./day.

### F. Review Process

The Audit team is expected to review policies and procedures of the office, fiscal and resource documents, planning documents, and other documents of interest. The Audit team will inspect facilities and interview staff as well as stakeholders. A self-inspection checklist, office description, and other forms may be required of the office, prior to visitation by the Audit team.

### G. Scope of Review

The Audit team will investigate specific issues of the jurisdiction which are brought to its attention as well as the following systemic issues, which will be investigated in the case of all audits:

- [Background]
- Statutory & regulatory authority
- Office organization

- Personnel & staffing
- Facilities & equipment
- Office administration, including policies & procedures
- Office support, including fiscal, resourcing, & political support
- Ability to become NAME accredited
- Areas for improvement and optimal practices
- Critical issues
- Recommendations

## H. Report

A formal Audit Report will be generated within four months and submitted to the office funding the audit, the Chief Medical Examiner or the Coroner, and the head autopsy physician in the case of a Coroner's office. The reports will not be further distributed or made public without prior approval. Submission of the report may be made contingent on receipt of payment during initial negotiations.

## I. Follow-Up Meetings


The jurisdiction being audited may request that the NAME Audit Team Leader, or designee, return to brief audiences or give presentations at a rate of \$2,000/day subject to consent of the Team Leader.

## J. Appeals

The jurisdiction being audited may request reconsideration of any component of the final report. It shall be understood that the jurisdiction cannot dictate the content of the revision and that NAME will retain independence of judgment. NAME is under no obligation to render a revised report, even after reconsidered deliberation. The request will be subject to negotiation with the Chair of the NAME Inspections and Accreditation Committee and subsequent approval by the NAME President. The scope and fee shall be subject to the negotiation. A follow-up visit may be required.

### III. ADOPTION

This National Association of Medical Examiner's Policy Manual was adopted by resolution approved by its Board of Directors on the 6th day of August, 2011. Revisions are approved by the Executive Committee as noted on the title page.



Scott Denton, MD, Secretary-Treasurer



# **NAME Inspection and Accreditation Checklist**

## **Adopted February 2014**



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Effective Date: January 2009

Date of Expiration: January 2019

Approved by Board of Directors February 2014

<b>A 4 Safety</b>		<b>P Result</b>				
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, addressing safety that comports with federal and state regulations with regard to injury and illness prevention, repetitive motion injuries, and biohazard and chemical exposure?	II	Y	N/A	N
	b	Are employees and visitors safe from physical, chemical, electrical, and biologic hazards?	II	Y	N/A	N
	c	Are safety policies and procedures written and posted or readily accessible?	II	Y	N/A	N
	d	Is a written blood-borne pathogen control program in place?	II	Y	N/A	N
	e	Are first-aid kits, safety showers, and eye washes strategically located in the laboratories?	II	Y	N/A	N
	f	Are dedicated and marked specialized safety containers used for disposing of hazardous chemicals and biologic waste that comport with federal, state, and local regulations regarding chemical and biological waste disposal?	II	Y	N/A	N
	g	Are safety cabinets or explosion-proof rooms in use for storage of volatile solvents?	II	Y	N/A	N
	h	Are electrical outlets and equipment properly grounded and ground fault circuit interrupters utilized in areas where water may pose an added risk?	II	Y	N/A	N
	i	Are "MSDS" (Material Safety Data Sheets) readily available in areas where potentially hazardous materials are stored or in use?	II	Y	N/A	N
	j	Are building evacuation diagrams available and posted in prominent and appropriate locations throughout the facility?	I	Y	N/A	N

<b>A 5 Maintenance</b>		<b>P Result</b>				
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering facility maintenance?	II	Y	N/A	N
	b	Are the facilities and all work areas clean, structurally sound, and well maintained?	II	Y	N/A	N
	c	Are public access areas comfortable, clean, and free from odor?	II	Y	N/A	N
	d	Are scientific equipment items that require periodic cleaning, adjustment or maintenance, such as microscopes, freezers and coolers, on a documented and appropriate maintenance schedule?	II	Y	N/A	N
	e	Are the heating/ventilation/air conditioning, plumbing, and electrical systems of the physical plant scheduled for routine inspection and preventive maintenance?	II	Y	N/A	N
	f	Are the electrical outlets and ground fault circuit interrupters tested for safety and proper functioning on at least a yearly basis?	II	Y	N/A	N

A	6	Organ and Tissue Donations	P	Result		
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering organ and tissue donation?	II	Y	N/A	N

A	7	Mass Disaster Plan	P	Result		
	a	Does the office have a written and implemented mass disaster (multiple fatality) plan, signed within the last two years, that includes consideration of weapons of mass destruction, protective clothing and equipment, body handling decontamination and disposal, and which mandates appropriate preparatory staff training?	II	Y	N/A	N
	b	Has the plan been promulgated with the participation of jurisdictional law enforcement, fire, and rescue, emergency agencies and hospitals?	I	Y	N/A	N
	c	Has the office coordinated with surrounding jurisdictions regarding mass disaster planning?	I	Y	N/A	N
	d	Has the office participated in local or regional mass disaster exercises?	I	Y	N/A	N
	e	Is a contact list of pertinent officials, offices, phone numbers, and e-mail addresses readily available?	II	Y	N/A	N
	f	Are alternative morgue sites designated?	I	Y	N/A	N
	g	Is there a plan for chemical mass disaster?	I	Y	N/A	N
	h	Is there a plan for biological mass disaster?	I	Y	N/A	N
	i	Is there a plan for a radiation/nuclear mass disaster?	I	Y	N/A	N

A	8	Quality Assurance	P	Result		
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering quality assurance?	II	Y	N/A	N
	b	Does the quality assurance procedure include a "feedback" mechanism, so that all identified errors are brought to the attention of those persons responsible for them?	I	Y	N/A	N
	c	Is the quality assurance program a planned and regularly scheduled activity?	II	Y	N/A	N
	d	Is the quality assurance program sufficient and adequate to assure the quality of the office or system work product?	II	Y	N/A	N
	e	Is there documentation of corrective action taken for identified deficiencies?	II	Y	N/A	N

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	f	Does the office actively participate on the local Child Death Review Committee (if one exists)?	I	Y	N/A	N
	g	Does the office have a procedural method of keeping track of unfinished or overdue case reports?	II	Y	N/A	N

<b>A</b>	<b>9</b>	<b>Annual Statistical Report</b>	<b>P</b>	<b>Result</b>		
	a	Does the office prepare an annual report tabulating total cases reported, accepted, examined, and autopsied, and the major causes of death sorted by each manner of death category?	II	Y	N/A	N
		<b>NOTE:</b> Mere availability of data from a computerized information management system does not satisfy this checklist item. A major rationale for the compilation of such data is the value they provide for analyzing and understanding the workload and short and long term trends that may affect an office. One Phase I for each missing report.				
	b	Does the office annually compile statistical data on deaths reported?	I	Y	N/A	N
	c	Does the office annually compile statistical data on cases accepted?	I	Y	N/A	N
	d	Does the office annually compile statistical data on manners of death?	I	Y	N/A	N
	e	Does the office annually compile statistical data on scene visits by medical examiners or medical examiner investigators?	I	Y	N/A	N
	f	Does the office annually compile statistical data on bodies transported by office or by order of the office?	I	Y	N/A	N
	g	Does the office annually compile statistical data on external examinations?	I	Y	N/A	N
	h	Does the office annually compile statistical data on complete autopsies?	I	Y	N/A	N
	i	Does the office annually compile statistical data on partial autopsies?	I	Y	N/A	N
	j	Does the office annually compile statistical data on hospital autopsies retained under ME jurisdiction?	I	Y	N/A	N
	k	Does the office annually compile statistical data on cases where toxicology is performed?	I	Y	N/A	N
	l	Does the office annually compile statistical data on bodies unidentified after examination?	I	Y	N/A	N
	m	Does the office annually compile statistical data on organ and tissue donations?	I	Y	N/A	N
	n	Does the office annually compile statistical data on unclaimed bodies?	I	Y	N/A	N
	o	Does the office annually compile statistical data on exhumations?	I	Y	N/A	N

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	p	Does the office annually compile statistical data on bodies transported to the office?	I	Y	N/A	N
	q	Does the office maintain a cross index of categories of cause and manner of death for statistical data retrieval?	I	Y	N/A	N

**B. INVESTIGATIONS**

<b>B</b>		<b>INVESTIGATIONS</b>		<b>P</b>		<b>Result</b>	
<b>B 1</b>		<b>Acceptance and Declining of Cases</b>					
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering case notification, acceptance of, and declining of cases?	II	Y	N/A	N	
	b	Is there an existing law (state, federal, county, or city) covering the medical examiner's (or coroner's) geographical area of jurisdiction that requires that deaths falling under the medical examiner's jurisdiction be reported promptly to the medical examiner's office by law enforcement agencies, physicians, hospital personnel, funeral directors, or other persons who become aware of a reportable case?	I	Y	N/A	N	
	c	Does the medical examiner accept notification from any person who has become aware of a death that might fall under the jurisdiction of the office?	II	Y	N/A	N	
	d	Is at least one published telephone number for the medical examiner's office in telephone books covering the jurisdiction?	II	Y	N/A	N	
	e	Is the phone number staffed 24 hours a day by a person able to arrange a disposition at all times?	II	Y	N/A	N	
	f	Are at least 20% of the deaths occurring within the office jurisdiction reported to the office?	I	Y	N/A	N	
	g	Does the medical examiner, if it is required, arrange for a formal pronouncement of death?	I	Y	N/A	N	
	h	Does the office attempt to notify the next-of-kin as soon as possible, if notification by another agency or individual cannot be confirmed?	I	Y	N/A	N	
	i	Is the case reviewed by a medical examiner at the time jurisdiction is released, or at a minimum, within 24 hours of release?	I	Y	N/A	N	

<b>B 2</b>		<b>Investigative Practices</b>		<b>P</b>		<b>Result</b>	
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering office investigations that addresses activities and responsibilities in the office and at death scenes?	II	Y	N/A	N	
	b	Is there a written and implemented office policy requiring a medical examiner or investigator to obtain the initial history of the fatal event, ascertain the essential facts and circumstances, elicit any pertinent medical history, and make a record of the names and addresses of any witnesses?	II	Y	N/A	N	

	c	Are emergency medical technicians interviewed when it is likely to be of benefit?	I	Y	N/A	N
	d	Are investigative reports routinely available to the pathologist prior to the beginning of any autopsy, external examination, or certification of death?	II	Y	N/A	N

<b>B</b>	<b>3</b>	<b>Scene Investigations</b>	<b>P</b>	<b>Result</b>		
	a	Is there a written and implemented policy identifying which cases require scene investigations?	II	Y	N/A	N
	b	Is it the written and implemented policy of the office to take charge of the body, the clothing on the body, and any evidence on the body which may aid in determining the identification of the deceased and the cause and manner of death?	II	Y	N/A	N
	c	Is a medical examiner or investigator available on a 24-hour basis to respond for a scene investigation?	II	Y	N/A	N
	d	Are medical examiner investigation response times recorded and monitored?	I	Y	N/A	N
	e	Does the medical examiner or investigator respond to the scene of those cases deemed necessary by the Chief Medical Examiner?	II	Y	N/A	N
	f	Are the hands protected in cases of homicides and suspicious deaths to safeguard evidence when indicated?	II	Y	N/A	N
	g	When a body has been removed from the scene or a person has been removed for treatment, are follow-up scene investigations conducted where appropriate and feasible?	I	Y	N/A	N
	h	Are office investigations autonomous and independent of law enforcement investigations?	I	Y	N/A	N
	i	Are deaths of children investigated in accordance with any applicable local or nationally recognized protocol?	II	Y	N/A	N
	j	Does the office have a procedure for the handling of money and valuable personal items?	II	Y	N/A	N
	k	Does the office have a procedure for the handling of prescription drugs?	II	Y	N/A	N
	l	Does the office have a procedure for the handling of illicit drugs?	II	Y	N/A	N
	m	Does the office have a procedure for the handling of evidence?	II	Y	N/A	N

<b>B</b>	<b>4</b>	<b>Identification</b>	<b>P</b>	<b>Result</b>		
	a	Does the office have a written and implemented policy or standard operating procedure covering identification procedures which is reviewed at least every two years?	II	Y	N/A	N
	b	Is there a case body numbering system in place for labeling all bodies?	II	Y	N/A	N

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	c	Is the method of identification recorded?	II	Y	N/A	N
	d	Does the office have access to conduct fingerprint comparison?	II	Y	N/A	N
	e	Does the office have access to conduct dental examination?	II	Y	N/A	N
	f	Does the office have access to conduct body x-rays?	II	Y	N/A	N
	g	Does the office have access to forensic anthropology?	I	Y	N/A	N
	h	Does the office have access to forensic serology and DNA analysis?	II	Y	N/A	N
	i	Is there a method by which family or friends can make visual identification of decedents, (e.g. a viewing room, instant photography, closed circuit television, digital photography, etc)?	II	Y	N/A	N
	j	Prior to disposition of unidentified bodies, does the office perform the following tasks in order to permit potential future identification: fingerprint the body; photograph the body; examine and chart the dentition; take x-rays; store specimens for DNA?	II	Y	N/A	N



**C. MORGUE OPERATIONS**

<b>C</b>	<b>MORGUE OPERATIONS</b>			<b>P</b>	<b>Result</b>			
<b>C</b>	<b>1</b>	<b>Body Handling</b>						
		a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering body transportation and handling?	II	Y	N/A	N	
		b	Does the body transport system reflect due respect for the decedent and the concerns of families?	II	Y	N/A	N	
		c	Are the stretchers and carts used to move the body sturdy, and in good repair, and free of sharp edges?	II	Y	N/A	N	
		d	Are body transport vehicles mechanically sound, clean, secure, dignified, and private?	II	Y	N/A	N	
		e	Are body transport vehicles kept in good repair and have regularly scheduled and documented maintenance records?	II	Y	N/A	N	
		f	Is the interior of each body transport vehicle regularly cleaned and disinfected?	II	Y	N/A	N	
		g	Do body handling procedures ensure the integrity of evidence by the use of sealed body bags or by other similarly effective means?	II	Y	N/A	N	
		h	Do body handling procedures include precautions against the biohazards associated with body handling?	II	Y	N/A	N	
		i	Is there a system to document the acquisition, custody, integrity, and release of personal effects?	II	Y	N/A	N	
		j	Is there a written and implemented procedure in place to assure the release of the correct body and personal effects to the funeral home?	II	Y	N/A	N	

<b>C</b>	<b>2</b>	<b>Body Handling Areas</b>			<b>P</b>	<b>Result</b>		
		a	Is the body receiving area adequate in size and designed to accommodate the usual volume of incoming and outgoing bodies with safety and security?	II	Y	N/A	N	
		b	Are body receiving and handling areas sequestered from public view?	II	Y	N/A	N	
		c	Is access to body receiving and handling areas limited and controlled?	II	Y	N/A	N	
		d	Is refrigerated storage space sufficient to accommodate the number of bodies and their handling during usual and peak loads?	II	Y	N/A	N	
		e	Is the refrigerated storage space easily accessible to the autopsy room and to the body release area?	I	Y	N/A	N	

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	f	Is a separate or functionally isolated room or area available for the storage of decomposed and known infectious bodies that is in accordance with principles, regulations, and laws regarding universal precautions and infectious disease hazards?	I	Y	N/A	N
	g	Are temperature monitoring devices present on each refrigerator and freezer space, is there an alarm system to warn of deviations from the acceptable range, and are monitoring records kept?	I	Y	N/A	N

<b>C</b>	<b>3</b>	<b>Autopsy Suites</b>	<b>P</b>	<b>Result</b>		
	a	Are private and secure lockers, changing areas, and shower facilities or the equivalent available for male and female employees?	I	Y	N/A	N
	b	Can the autopsy room accommodate the usual and peak case load including the typical number of autopsies and external examinations, the normal complement of autopsy and laboratory personnel, official participants and observers from cooperating agencies?	I	Y	N/A	N
	c	Does the ventilation system control odor and fumes and prevent them from entering and leaving the autopsy and body storage areas?	I	Y	N/A	N
	d	Do the heating and cooling systems maintain a working environment conducive to effective work performance?	II	Y	N/A	N
	e	Is the lighting adequate?	II	Y	N/A	N
	f	Is a body scale located in or near the autopsy room, the body reception, or pre-autopsy preparation area?	II	Y	N/A	N
	g	Is there a written scale calibration policy with documentation (i.e., when calibrated, by whom)?	II	Y	N/A	N
	h	Are sufficient autopsy stations available for the usual case volume?	I	Y	N/A	N
	i	Is suction available at the autopsy stations?	I	Y	N/A	N
	j	Are autopsy dissecting sinks equipped with back flow protection devices?	II	Y	N/A	N
	k	Is there a stable surface for dissection at each station (either table stand or permanent structure; note e.g., merely a loose cutting board)?	I	Y	N/A	N
	l	Are floor, sink, and table drains able to handle autopsy waste and small particulate matter, with clean-out traps easily accessible?	II	Y	N/A	N
	m	Are surfaces for preparation of documents and records far enough removed from the examination areas to avoid inadvertent contamination?	I	Y	N/A	N
	n	Are surfaces in the autopsy room nonporous and easily cleaned?	I	Y	N/A	N

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	o	Is dictation equipment or another means of recording postmortem findings available in the autopsy room, adjacent to the autopsy room, or in physicians' offices?	II	Y	N/A	N
	p	Are x-ray view boxes or monitors present to permit concurrent viewing during the autopsy?	I	Y	N/A	N
	q	Is/are (a) separate or functionally isolated room(s) or area(s) available for the autopsies of decomposed and known infectious bodies?	I	Y	N/A	N
	r	Are HEPA filters utilized, where appropriate, to reduce biohazard risks?	I	Y	N/A	N
	s	Are appropriate personal protective devices including face protection, chest and arm protection, gloves, shoe covers, and N95 Respirators or PAPRS available to staff so as to reduce biohazard risks?	II	Y	N/A	N
	t	Are standard precautions ("universal precautions") used when performing autopsies and handling biological specimens?	II	Y	N/A	N
	u	Are autopsy tables and dissection areas disinfected with bactericidal/virucidal solutions on a daily basis if they have been used?	II	Y	N/A	N
	v	Is appropriate storage space available and secured for decedent personal effects, evidence recovered during investigations, tissues and evidence recovered from bodies, and specimens held for additional laboratory analysis?	II	Y	N/A	N
	w	Is space available for examination of clothing, personal effects and other items or evidence discovered on or about the body with a work area or provision that prevents cross contamination of specimens and provides for effective preservation of each item's integrity?	I	Y	N/A	N
	x	Are tissue storage areas ventilated and free of formaldehyde, putrefied tissue, and other unpleasant odors?	I	Y	N/A	N
	y	Is there separate and safe storage space for reagent gases, solvents, and chemicals?	I	Y	N/A	N

<b>C</b>	<b>4</b>	<b>Radiologic Facilities</b>	<b>P</b>	<b>Result</b>		
	a	Does the office have access to radiographic equipment or services?	II	Y	N/A	N
	b	Is radiographic equipment installed in a convenient location in or near the autopsy room?	I	Y	N/A	N
	c	Is the radiographic equipment shielded in accord with the radiation safety standards promulgated by state and federal regulation?	II	Y	N/A	N

<b>C</b>	<b>5</b>	<b>Radiology</b>	<b>P</b>	<b>Result</b>		
	a	Is a written schedule of exposures (i.e., an x-ray "technique" chart) on hand, or is there an alternative system in place so as to ensure proper x-ray film exposure?	II	Y	N/A	N
	b	Are radiographs labeled with case number and right/left designation on each film?	II	Y	N/A	N
	c	Are the quality of radiographs commensurate with the purpose of the x-ray examination?	II	Y	N/A	N
	d	Are radiographs filed so as to be readily retrievable?	II	Y	N/A	N
	e	When performed in-house, are the x-ray development equipment and reagents routinely maintained according to a set schedule and is this documented?	II	Y	N/A	N
	f	Is in-house x-ray equipment periodically assessed for performance improvement, radiation protection, x-ray beam collimation, and biomedical safety, and are records of these evaluations maintained?	II	Y	N/A	N
	g	Is the x-ray film development subject to effective quality control and are x-ray films of good diagnostic quality?	II	Y	N/A	N
	h	Is there a documented program in place to assure that all personnel exposed to x-ray or other radiation sources are monitored for radiation exposure; as part of this policy, is there a mechanism in place to identify persons who are approaching, have reached, or have exceeded their exposure limits and to take appropriate actions?	II	Y	N/A	N
	i	Is x-ray equipment properly and currently licensed and maintained?	II	Y	N/A	N

<b>C</b>	<b>6</b>	<b>Postmortem Examinations</b>	<b>P</b>	<b>Result</b>		
	a	Does the office have a written and implemented policy or standard operating procedure covering postmortem examination procedures which is reviewed at least every two years?	II	Y	N/A	N
	b	Is there a written and implemented policy which specifies the criteria for the determination of when complete autopsies, partial autopsies, or external examinations are to be performed?	I	Y	N/A	N
	c	Are autopsies performed in greater than 95% of all cases suspected of homicide at the time of death?	II	Y	N/A	N
	d	Are autopsies performed in greater than 95% of all cases in which the manner of death is undetermined at the time an autopsy decision is made?	II	Y	N/A	N
		<b>NOTE:</b> Some inspector discretion allowed.				
	e	Are the circumstances of death, if known, reviewed prior to autopsy?	II	Y	N/A	N

	f	Does the medical examiner/autopsy physician personally examine all external aspects of the body in advance of dissection?	II	Y	N/A	N
	g	Is a medical examiner/autopsy physician responsible for the conduct of each postmortem examination, the diagnoses made, the opinions formed, and any subsequent opinion testimony?	II	Y	N/A	N
	h	Are all autopsy ex-situ dissections personally performed by a medical examiner/autopsy physician?	II	Y	N/A	N
	i	Is all assistance rendered by pathology assistants, autopsy technicians, dieners, or others without medical training performed in the physical presence of and under the direct supervision of a medical examiner/autopsy physician?	II	Y	N/A	N
	j	Are specimens routinely retained for toxicological and histological examination during autopsies?	II	Y	N/A	N
	k	Is there a written and implemented office policy which defines when radiographic examinations are to be performed?	I	Y	N/A	N
	l	Is there written and implemented office policy that defines when ancillary tests or procedures are to be undertaken (e.g., outlining when histological, toxicological, microbiologic, biochemical, genetic [including DNA], anthropological, and odontologic specimen collection, testing, or consultation is to be done or sought)?	I	Y	N/A	N
	m	Does the office have a written policy or standard operating procedure covering the retention and disposition of organ and tissue specimens taken at autopsy, that addresses whether, or under what circumstances, next-of-kin are to be notified of each retention?	II	Y	N/A	N
		<b>NOTE:</b> NAME recognizes the complexity and sensitivity of this issue, and acknowledges that either decision-to notify family members, or to avoid intrusion upon a family, is accepted and appropriate in the practice of death investigation.				
	n	Are samples routinely obtained for potential DNA analysis?	II	Y	N/A	N

<b>C 7 Evidence and Specimen Collection</b>			<b>P</b>	<b>Result</b>		
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering evidence collection?	II	Y	N/A	N
	b	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering tissue and body fluid specimen collection?	II	Y	N/A	N
	c	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years covering evidence and specimen disposition and destruction?	II	Y	N/A	N

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	d	When collected, are autopsy tissue and fluid specimens individually collected; adequately packaged; properly labeled; appropriately preserved; and archived using a consistent and logical specimen numbering system?	II	Y	N/A	N
	e	Are specimen containers labeled with the case number and the date collected; the type of contents; the name of the deceased; the name of the medical examiner or the responsible physician; and the name of the person securing	II	Y	N/A	N
	f	Are specimens collected for microbiological evaluation placed into appropriate transport media or sterile containers?	II	Y	N/A	N
	g	Are microbiologic specimens promptly transported to the service laboratory?	II	Y	N/A	N
	h	In cases of suspected sexual contact are control hair samples collected from the decedent by plucking a representative number of hairs from various body areas, e.g. scalp and pubic areas?	II	Y	N/A	N
	i	In cases of suspected sexual contact is the pubic area lightly combed to obtain loose and foreign hairs, and are native control hairs plucked and packaged separately?	II	Y	N/A	N
	j	In cases of suspected sexual contact are swabs of body orifices obtained and examined for the presence of spermatozoa, the presence of seminal fluid, and DNA and/or serologic markers?	II	Y	N/A	N
	k	In cases of suspected sexual contact are bite marks processed according to procedures consistent with forensic odontologic practice (ABFO)?	II	Y	N/A	N
	l	Are DNA specimens retained indefinitely?	I	Y	N/A	N

<b>C 8 Chain of Custody</b>			<b>P</b>	<b>Result</b>		
	a	Are forms for chain of custody receipt in use?	II	Y	N/A	N
	b	Do chain of custody forms include the case number and/or name; description of the evidence; the persons involved in the transfer; date of transfer; and appropriate signatures?	II	Y	N/A	N
	c	Is the medical examiner able to assure the integrity of the chain of custody of evidentiary items, while under his or her control?	II	Y	N/A	N

**D. HISTOLOGY**

<b>D</b>		<b>HISTOLOGY</b>					
<b>D</b>	<b>1</b>	<b>Histological Laboratory Space</b>		<b>P</b>	<b>Result</b>		
	a	Does the office have access to histology services?		II	Y	N/A	N
	b	Is adequate space and equipment provided for tissue cutting and for histological preparation of microscopic slides, including an area for special staining methods?		II	Y	N/A	N
	c	Is each work station supplied with electricity and water and properly vented to remove solvent and fixative fumes?		II	Y	N/A	N

<b>D</b>	<b>2</b>	<b>Histology Practices</b>		<b>P</b>	<b>Result</b>		
	a	Are microscopic slides retained indefinitely?		II	Y	N/A	N
	b	Are paraffin blocks stored in a cool area and retained for at least ten years?		II	Y	N/A	N
	c	In addition to routine H&E staining, are special stains available for microorganisms, iron, fat, and connective tissue?		II	Y	N/A	N
	d	Are special stains returned with appropriate control slides?		II	Y	N/A	N
	e	Is a cryostat available for rapid diagnosis and for fat stains?		I	Y	N/A	N
	f	Are microscopic slides prepared, examined, and reported in all sudden infant deaths, and where feasible, in unexplained deaths, and where necessary to establish a tissue diagnosis?		II	Y	N/A	N
	g	Are formalin-fixed or paraffin-embedded tissues stored for at least one year in cases in which microscopic slides are not prepared?		I	Y	N/A	N
		<b>NOTE:</b> In cases involving skeletonized remains and other remains not suitable for embedding or microscopy, this checklist item would not apply.					

## E. TOXICOLOGY

E		TOXICOLOGY			
E	1	Toxicological Laboratory Space		P	Result
	a	Does the office have access to a forensic toxicology laboratory?	II	Y	N/A N
	b	Does the toxicology laboratory have suitable space, equipment, scientific instrumentation, reagents, and supplies to manage the caseload?	II	Y	N/A N
	c	Is there an appropriate and safe storage system in place for chemicals and reagents, and is there provision for recognition and proper disposal of outdated and expired items?	II	Y	N/A N
	d	Is there a properly ventilated and maintained fume hood in the laboratory or available to laboratory personnel for handling dangerous or unpleasant samples of reactions?	II	Y	N/A N
	e	Is the toxicology laboratory used by the office accredited by an Accreditation Body who is a signatory to the International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement (MRA) and offers forensic laboratory accreditation services or a major accreditation body acceptable to NAME?	II	Y	N/A N

E		2 Toxicology Practices			P	Result
	a	Is the toxicology laboratory in compliance with the guidelines of the Society of Forensic Toxicologists (SOFT), or accredited by the American Board of Forensic Toxicology (ABFT), the College of American Pathologists (CAP), or a state reference laboratory?	I	Y	N/A N	
	b	Is testing routinely available for ethanol and volatiles; carbon monoxide; major drugs of abuse; major acidic drugs; and major basic drugs?	II	Y	N/A N	
	c	Does the office have access to stat carbon monoxide testing?	I	Y	N/A N	
		<b>NOTE:</b> Toxicology by itself should not be used as a substitute for a forensic autopsy or as a substitute for a careful search of a death scene for health and safety hazards.				
	d	Are tests performed according to written standard operating procedures?	II	Y	N/A N	
	e	Does the toxicology laboratory participate in external drug proficiency testing for drugs of abuse, and are appropriate corrective actions undertaken and recorded when the results of this testing are outside of compliance limits?	II	Y	N/A N	
	f	Is there active monitoring of the laboratory for quality assurance, and are corrective actions taken when indicated?	II	Y	N/A N	



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	g	Are 90% of toxicology examinations completed within 90 calendar days of case submission?	II	Y	N/A	N
	h	Are 90% of toxicology examinations completed within 60 calendar days of case submission?	I	Y	N/A	N
	i	If the office has computerized information management system, is there an appropriate security system in place to prevent intrusion, unauthorized release of information, or unauthorized addition, deletion, or alteration of data?	II	Y	N/A	N
	j	Is there a system to monitor and track overdue toxicology reports?	II	Y	N/A	N

<b>E</b>	<b>3</b>	<b>Toxicologists</b>	<b>P</b>	<b>Result</b>		
	a	Does the Chief Toxicologist have formal training and experience in forensic toxicology?	II	Y	N/A	N
	b	Does the Chief Toxicologist hold a relevant doctoral degree from an accredited institution?	I	Y	N/A	N
	c	Is the Chief Toxicologist certified by the American Board of Forensic Toxicology (ABFT) or certified in toxicological chemistry by the American Board of Clinical Chemistry (ABCC) or the international equivalent?	I	Y	N/A	N

<b>E</b>	<b>4</b>	<b>Toxicology Specimens</b>	<b>P</b>	<b>Result</b>		
	a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, for the collection of toxicology specimens?	II	Y	N/A	N
	b	Is peripheral blood rather than central blood used for toxicological testing whenever possible?	I	Y	N/A	N
	c	Is the site of collection (peripheral, central [heart/great vessels], dural sinus, chest cavity, subdural hematoma, etc.) of blood used for toxicology recorded?	II	Y	N/A	N
	d	Are specimens for toxicology promptly delivered to the toxicology laboratory or stored in a secure refrigerator or freezer until delivery is effected?	II	Y	N/A	N
	e	When toxicology is requested, is the toxicologist made aware of the circumstances surrounding the death and any medications which may have been taken by the decedent?	II	Y	N/A	N
	f	Are toxicological specimens retained for at least two months in routine cases and 1 year in homicide cases after receipt of report by the medical examiner?	II	Y	N/A	N
	g	In cases of delayed death in hospitalized victims, does the office attempt to obtain the earliest available specimen from the hospital when appropriate?	II	Y	N/A	N

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		h	In deaths associated with the possible inhalation of toxic gases, are airway and lung specimens collected and stored in containers suitable for headspace analysis?	I	Y	N/A	N
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**F. REPORTS AND RECORD KEEPING**

<b>F</b>		<b>REPORTS AND RECORD KEEPING</b>					
<b>F</b>	<b>1</b>	<b>Reports and Record Keeping</b>		<b>P</b>	<b>Result</b>		
		a	Does the office have a written and implemented policy or standard operating procedure, signed within the last two years, covering reports and record keeping?	II	Y	N/A	N
		b	Is the record storage space secure, with controlled access, to ensure the integrity of the reports?	I	Y	N/A	N
		c	Are records kept in an orderly fashion for easy retrieval of data?	II	Y	N/A	N
		d	Are the original case reports retained under the care, custody, and control of the office?	II	Y	N/A	N
		e	Are the original reports kept under the custody of the office?	II	Y	N/A	N
		f	Does each report prepared under the authority of the office include the name of the deceased, if known, and the case accession number?	II	Y	N/A	N
		g	Are there forms for initial notification of death; scene investigation; requests for autopsy reports; chain of custody; and authorization for release of reports and records if required by law?	II	Y	N/A	N
		h	Does the office have a written and implemented policy indicating professional staff responsibilities for completing unfinished or overdue cases in a set period of time which is reviewed at least every two years?	II	Y	N/A	N
		i	Are the run sheets of emergency medical technicians, emergency room records, and hospital charts available to the medical examiner in accepted cases?	I	Y	N/A	N
		j	In criminal cases and violent deaths, does the medical examiner have access to and obtain as needed the investigative findings of the police, fire department, and other investigative agencies?	II	Y	N/A	N
		k	Is a history of past medical illness and current treatment verified with the attending physician or by review of the decedent's medical and emergency treatment records in applicable cases?	II	Y	N/A	N
		l	Are all paper components of the death investigation in a given case filed in the same place, including investigative reports, scene reports, body examinations, supplemental laboratory reports and consultations, and follow-up information?	I	Y	N/A	N
		m	Are completed records located in a central record storage area?	II	Y	N/A	N
		n	If long term archival records are stored in a location off premises, are they secure and retrievable?	II	Y	N/A	N
		o	Is there sufficient record storage space available for a minimum of five years of current reports and records?	II	Y	N/A	N

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	p	Do written and implemented guidelines detail the archiving and destruction times for all records?	I	Y	N/A	N
	q	Does the office have a written and implemented policy or standard method for filing, to include how, where, and which records are stored?	I	Y	N/A	N
	r	Does the office have a computerized information management system?	I	Y	N/A	N
	s	Where the office records are computerized, are they adequately backed up to prevent loss in case of computer malfunction or failure?	II	Y	N/A	N

<b>F</b>	<b>2</b>	<b>Release of Information</b>	<b>P</b>	<b>Result</b>		
	a	Are copies of official reports available to those individuals having a legitimate right to them?	II	Y	N/A	N
	b	Is there a written and implemented procedure regarding distribution of records and information?	I	Y	N/A	N
	c	Are copies of the applicable law, regulations, guidelines and, legal opinions available in regard to the release of records and information?	II	Y	N/A	N
	d	Does the office have a written and implemented policy regarding media contact?	I	Y	N/A	N
	e	Does the office have a primary person designed to release or to oversee the release of public information?	II	Y	N/A	N

<b>F</b>	<b>3</b>	<b>Investigative Reports</b>	<b>P</b>	<b>Result</b>		
	a	Are records of the initial case investigative contact available on every death reported to the office, whether or not jurisdiction is accepted?	II	Y	N/A	N
	b	Is there a routine reporting form to be filled out by death investigators for case acquisition?	II	Y	N/A	N
	c	Does the office maintain a log of each official case investigation performed by office investigators?	II	Y	N/A	N
	d	Is a written scene investigation report prepared by the office for every scene visited?	II	Y	N/A	N
	e	Do investigation reports include, as applicable, the history obtained from investigators and witnesses; past medical history; circumstantial history; scene observations; pertinent body findings and notations regarding photographs taken and evidence recovered?	II	Y	N/A	N

	f	Are diagrams or photographs or digital images prepared to clarify essential spatial relationships between the body, its environment, and any significant investigative facts such as blood, evidence, weapons/instruments, etc., where appropriate?	I	Y	N/A	N
	g	Are significant circumstantial and physical observations noted and recorded regarding the time of death, (including the presence, location and degree of rigor; the location, fixation, and color of postmortem livor; and, when indicated, the temperature of body and environmental temperature and climatic conditions)?	I	Y	N/A	N

F	4	Reports of Postmortem Examinations	P	Result		
	a	Is a written narrative autopsy report prepared in every autopsied case?	II	Y	N/A	N
	b	Are written notes taken for each autopsy that, along with review of photographs and other records, could be used as a basis for report generation if dictated tapes become lost or damaged?	I	Y	N/A	N
	c	Does the autopsy report include a description of external and internal findings, external and internal evidence of injury, review of organ systems, listing of diagnoses or summary of case findings, and opinions regarding the cause and manner of death?	II	Y	N/A	N
	d	Is there written documentation of a physical examination of the decedent's unclothed body prepared for every decedent whose body is examined?	II	Y	N/A	N
	e	Are clothing and personal effects examined and inventoried in all cases brought into the office for postmortem examination?	II	Y	N/A	N
	f	Are records kept identifying autopsy participants and observers who are from other agencies or entities?	I	Y	N/A	N
	g	Is a written list/catalog of histology sections taken, designating the organ or anatomic site from which the section was obtained, made for each autopsy that includes histology?	I	Y	N/A	N
	h	Are diagnoses or conclusions arrived at by microscopic examination (histology) included in the final autopsy report's list of diagnoses or summary of case findings or opinion section?	II	Y	N/A	N
	i	Is the cause and manner of death listed in the autopsy report consistent with that stated on the death certificate?	II	Y	N/A	N
		<b>NOTE:</b> In coroner jurisdictions, is there a system by which the cause and manner of death placed on the death certificate are made available to the autopsy surgeon?				
	j	Does the forensic pathologist sign the autopsy report after it has been transcribed, proofread, and corrected?	II	Y	N/A	N
	k	Are 90% of reports of all postmortem examinations completed within 90 calendar days from the time of autopsy?	II	Y	N/A	N

	I	Are 90% of reports of all postmortem examinations completed within 60 calendar days from the time of autopsy?	I	Y	N/A	N
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<b>F</b>	<b>5</b>	<b>Death Certificates</b>	<b>P</b>	<b>Result</b>		
	a	Does the office, in certifying the cause and manner of death, conform to the format of the death certificate prescribed by the local authorities?	II	Y	N/A	N
	b	Is standardized terminology of recognized disease nomenclature such as ICD 9/10 used in the filling out of death certificates?	I	Y	N/A	N
	c	(Medical Examiner Jurisdictions) Is the death certificate prepared and signed by the autopsy physician, the Chief Medical Examiner, or his or her (the medical examiner's) designee?	II	Y	N/A	N
	d	(Coroner Jurisdictions) Is there a system in place so that the death certificate's conclusions and wording reflect the findings and reasoning of the autopsy surgeon?	II	Y	N/A	N
	e	Are death certificates filed in a timely manner in keeping with the legal requirements of the jurisdiction or jurisdictions covered by the office?	II	Y	N/A	N
	f	When a death certification has been deferred or left pending, is there a mechanism in place that ensures that requisite information, tests, or data is sought, and that the certification is then completed in a reasonable time?	II	Y	N/A	N
	g	Does the office keep a current and up-to-date list of pending cases that includes unsigned and incomplete death certificates?	II	Y	N/A	N
	h	Are copies of death certificates of all cases in the case files or somehow retrievable?	II	Y	N/A	N

<b>F</b>	<b>6</b>	<b>Photographic Records and Practices</b>	<b>P</b>	<b>Result</b>		
	a	Is there a designated staff member responsible for the inventory, care, and maintenance of the photographic equipment and supplies?	I	Y	N/A	N
	b	Is an identifying label included in each photograph such that the label does not obscure the identifying features of the decedent; or alternatively, does at least one photograph per set of photographs in a given case include a label to permit post process labeling of film?	II	Y	N/A	N
	c	Are photographs taken prior to examination or processing of trace evidence, foreign material, blood patterns, and other items important for determining the cause and manner of death or necessary for medicolegal interpretation or presentation?	II	Y	N/A	N

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	d	Are orientation photographs (photographs of the same area from a distance or with a frame of reference) taken when close-up photographs are taken?	I	Y	N/A	N
	e	Is at least one measurement scale included in close-up photographs, with evidence photographs, and in those cases when no frame of reference is present in the field of view?	II	Y	N/A	N
	f	Is an American Board of Forensic Odontology (ABFO) scale included in all bite mark photographs?	I	Y	N/A	N
	g	Are all photographs and any negatives labeled and filed in a retrievable manner?	II	Y	N/A	N
	h	Does the office document pertinent external and internal findings photographically?	II	Y	N/A	N
	i	Is at least one identification photograph taken of all bodies brought to the office?	II	Y	N/A	N
	j	Is there photographic documentation of pertinent findings in suspected homicides?	II	Y	N/A	N
	k	In cases of homicide or suspected homicide, if digital photographic imaging is used, is a backup system employed such as supplementary film photography, or is collateral photography performed by law enforcement personnel or by another agency or is the success of digital photographs verified at the time of autopsy so as to foreclose the unavailability of appropriate photographic documentation?	I	Y	N/A	N
	l	Are digital photographs backed up daily, in a location separate from the original, so that a computer failure would not result in permanent loss?	II	Y	N/A	N
	m	Are electronic photograph files copied and stored in at least two locations to prevent loss from a computer malfunction?	I	Y	N/A	N

**G. PERSONNEL AND STAFFING**

<b>G</b>		<b>PERSONNEL AND STAFFING</b>				
<b>G</b>	<b>1</b>	<b>Personnel</b>	<b>P</b>	<b>Result</b>		
	a	Does the office have a written and implemented policy, signed within the last two years, covering personnel issues?	II	Y	N/A	N
	b	Has a copy of the personnel policies been distributed to all personnel?	II	Y	N/A	N
	c	Are all new personnel provided information on the written policies of the office during orientation?	II	Y	N/A	N
	d	Are there written and implemented procedures for discipline and removal of staff for cause?	II	Y	N/A	N
	e	Are all potentially exposed or at-risk office staff offered vaccination for Hepatitis B, and is such vaccination or refusal to be vaccinated documented?	II	Y	N/A	N
	f	Is yearly tuberculosis testing offered to at-risk office staff, and is such testing or refusal to be tested documented?	II	Y	N/A	N
	g	Are office staff with a history of positive skin tests offered yearly follow-up evaluation?	II	Y	N/A	N

<b>G</b>		<b>Professional Staff - Medical Examiners</b>				
<b>G</b>	<b>2</b>	<b>Professional Staff - Medical Examiners</b>	<b>P</b>	<b>Result</b>		
	a	Is the Chief Medical Examiner or the Coroner's autopsy surgeon a pathologist granted, by the American Board of Pathology (or an international equivalent approved by the inspection and accreditation committee), a certificate of qualification for the practice of Forensic Pathology, and does he or she have at least two years of forensic pathology work experience beyond forensic pathology residency/fellowship training?	II	Y	N/A	N
	b	Is the Chief Medical Examiner licensed to practice medicine or osteopathy by the appropriate state or jurisdictional authority granting such licenses where the office is located?	II	Y	N/A	N
	c	Is the Chief Medical Examiner employed full time, and are the office duties his or her primary professional obligation?	II	Y	N/A	N
	d	When the Chief Medical Examiner is not available, is a deputy Chief Medical Examiner or an associate medical examiner who possesses qualifications similar to those of the Chief Medical Examiner available in an alternate capacity?	I	Y	N/A	N
		<b>NOTE:</b> In small offices staffed by one or a few physicians, the practicalities of coverage should be considered. At times when regular physician coverage is, of necessity, unavailable, is there a policy or practice specifying reasonable alternative autopsy decision-making responsibility?				



	e	When the Chief Medical Examiner is not available, is there a deputy Chief Medical Examiner or an associate medical examiner who is licensed to practice medicine or osteopathy by the appropriate state or jurisdictional authority granting such licenses where the office is located?	II	Y	N/A	N
	f	Are all associate/deputy medical examiners or physicians responsible for autopsies pathologists who have completed a training program in anatomic pathology accredited by the Accreditation Council for Graduate Medical Education (ACGME) or equivalent?	II	Y	N/A	N
	g	Are all associate/deputy medical examiners or physicians responsible for postmortem examinations and autopsies licensed to practice medicine or osteopathy by the appropriate state or jurisdictional authority granting such licenses where the office is located?	II	Y	N/A	N
	h	Are all associate/deputy medical examiners or physicians ultimately responsible for autopsies pathologists who are board certified in anatomic pathology by the American Board of Pathology and who have completed at least one year of supervised training under the supervision of a forensic pathologist certified by the American Board of Pathology (or an international equivalent approved by the inspection and accreditation committee), or are they themselves so certified?	I	Y	N/A	N
		<b>NOTE:</b> One Phase I for each unqualified physician.				
	i	Is the medical staff of sufficient size that no autopsy physician is required to perform more than 325 autopsies/year? (See note after G2j)	II	Y	N/A	N
	j	Is the medical staff of sufficient size that no autopsy physician is required to perform more than 250 autopsies/year?	I	Y	N/A	N
		<b>NOTE 1:</b> In considering compliance with items G2i and G2j, it should be recognized that within a working team, duties and activities are often divided in such a way that one or more team members might perform in excess of the permitted number of autopsies. This is not a per se deficiency unless the autopsy load and the size of the pathology workforce would make it inevitable that the limit would be exceeded.				
		<b>NOTE 2:</b> For the purpose of calculating autopsies per pathologist in G2i and G2j, fellows may be counted as one-half a pathologist position, but residents in training should not be included in the fractional denominator.				

		<b>NOTE 3:</b> For the purpose of calculating autopsy load in items G2i and G2j, the workload from external examinations should also be considered. Three to five formal (dictated or written) external examinations (depending on their complexity) should be considered to be equivalent to one complete autopsy. For example, a workload of 200 complete autopsies and 150 external examinations would be equivalent to 250 autopsies. Further consideration should be given to autopsy coverage that entails travel to a separate facility. The inspector should adjust the calculation to reflect the time required. For example, two hours of travel time should be considered equivalent to one autopsy.				
		<b>NOTE 4:</b> For the purpose of calculating the autopsies per pathologist in G2i and G2j, the administrative and leadership duties of the department chief should be considered. In large and complex offices, the chief may spend almost all of his or her time in non-autopsy activities; in such instances, that position should be eliminated from the fractional denominator. By contrast in a small office or in an office organized so that administrative duties are not a substantial burden, it may be appropriate to make only a modest reduction of the fractional denominator.				
		<b>NOTE 5:</b> For the purpose of calculating the autopsies per pathologist in G2i and G2j, other significant responsibilities should be taken into consideration. For example, pathologists with significant collateral responsibilities in academic, surgical pathology, laboratory work, research, consulting, or other assignments should be reflected by an appropriate readjustment of the fractional denominator.				
	k	Are all medical staff licensed to practice medicine in all jurisdictions covered by the office?	II	Y	N/A	N
	l	Does the office have a written and implemented policy, signed within the last two years, on medical staff performing autopsies or medicolegal consultations outside the office?	II	Y	N/A	N

G	3	Medical Investigators	P	Result		
	a	Are there written and implemented qualifications established for medical investigators?	II	Y	N/A	N
	b	Have medical investigators received specific training in the policies and procedures of the office?	II	Y	N/A	N
	c	Is the office's chief investigator or is at least one principal investigator a Registered Diplomate of the American Board of Medicolegal Death Investigators?	I	Y	N/A	N

	d	Are a majority of the medical investigators who have worked in the office for over 5 years Registered Diplomates or Board Certified Fellows of the American Board of Medical Death Investigators?	I	Y	N/A	N
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<b>G 4 Other Personnel (Technical)</b>			<b>P</b>	<b>Result</b>		
	a	Does the office have written and implemented policies for the qualifications and training necessary for all technical staff (e.g., histotechnologists, radiology technicians, etc.)?	I	Y	N/A	N
	b	Is there sufficient technical staff coverage to handle the routine daily caseload for autopsy assistance?	II	Y	N/A	N
	c	Is there sufficient technical staff coverage to handle the routine daily caseload for histology?	I	Y	N/A	N
	d	Is there sufficient technical staff coverage to handle the routine daily caseload for forensic photography?	I	Y	N/A	N
	e	Is there sufficient technical staff coverage to handle the routine daily caseload for x-ray?	II	Y	N/A	N
	f	Is there sufficient technical staff coverage to handle the routine daily caseload for toxicology?	I	Y	N/A	N
	g	Is there sufficient technical staff coverage to handle the routine daily caseload for investigations 24/7?	II	Y	N/A	N

<b>G 5 Other Personnel (Non-Technical)</b>			<b>P</b>	<b>Result</b>		
	a	Is there sufficient non-technical staff coverage to handle the routine daily caseload for administration?	II	Y	N/A	N
	b	Is there sufficient non-technical staff coverage to handle the routine daily caseload for visitor reception?	II	Y	N/A	N
	c	Is there sufficient non-technical staff coverage to handle the routine daily caseload for medical transcription?	II	Y	N/A	N
	d	Is there sufficient non-technical staff coverage to handle the routine daily caseload for records keeping?	II	Y	N/A	N
	e	Is there sufficient non-technical staff coverage to handle the routine daily caseload for data analysis?	I	Y	N/A	N
	f	Is there sufficient non-technical staff coverage to handle the routine daily caseload for body handling and transportation?	II	Y	N/A	N
	g	Is there sufficient non-technical staff coverage to handle the routine daily caseload for maintenance and cleaning?	II	Y	N/A	N

<b>G 6 Professional Credentials and Privileges</b>			<b>P</b>	<b>Result</b>		
	a	Is licensure of the medical staff verified at the time of initial employment?	II	Y	N/A	N

**NAME Inspection and Accreditation Checklist**

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	b	Is continued current licensure of the medical staff verified annually?	I	Y	N/A	N
	c	Does the Chief Medical Examiner evaluate the performance of each member of the professional staff at least once each year if such evaluations are permissible under local statutes or labor contracts?	I	Y	N/A	N

<b>G 7 Staff Training and Continuing Education</b>			<b>P</b>	<b>Result</b>		
	a	Is each licensed professional employee required to, and given time to, participate in continuing education?	II	Y	N/A	N
	b	Is sufficient funding provided to each licensed professional employee for office approved and professionally required continuing education?	I	Y	N/A	N
	c	Is there continuing education available for all medical investigators?	I	Y	N/A	N
	d	Are operators of radiologic equipment properly trained?	II	Y	N/A	N
	e	Are all staff members, medical and nonmedical, who perform duties in a training capacity continually supervised and monitored by a qualified practitioner?	II	Y	N/A	N
	f	Is there a mechanism whereby the signed reports of trainees in forensic pathology are reviewed and approved in writing by a faculty pathologist?	II	Y	N/A	N
	g	Are the reports of trainees in forensic pathology who are not licensed to practice medicine in the state where they are training cosigned by a faculty pathologist?	II	Y	N/A	N
	h	If the office has training program for forensic pathologists, is the program accredited by the American Council for Graduate Medical Education (ACGME)?	II	Y	N/A	N

<b>G 8</b>	<b>Performance Evaluation and Monitoring</b>		<b>P</b>	<b>Result</b>		
	a	Do in-house laboratories participate in external proficiency tests?	II	Y	N/A	N
	b	Does the medical staff participate in external check samples and/or proficiency surveys?	I	Y	N/A	N
	c	Are staff sign-out conferences regularly scheduled for discussion and disposition of pending and problem cases?	I	Y	N/A	N
		<b>NOTE:</b> At an inspector's discretion in small offices, scheduled formal discussions may be replaced by evidence of readily available informal consultation among staff or with outside consultants.				
	d	Is there a system in place for annual review of autopsy performance and quality of associated reports?	II	Y	N/A	N

**H. SUPPORT SERVICES AND CONSULTANTS**

<b>H</b>		<b>SUPPORT SERVICES AND CONSULTANTS</b>		<b>P</b>	<b>Result</b>		
<b>H</b>	<b>1</b>	<b>Support Services</b>					
		a	Does the office have written and implemented policies or standard operating procedures, signed within the last two years, covering each of the below support services including toxicology, radiology, histology, forensic sciences, and Criminalistics?	I	Y	N/A	N
		<b>NOTE:</b> One Phase I deficiency for each missing policy.					
<b>H</b>	<b>2</b>	<b>Criminalistics/Forensic Science Examinations</b>		<b>P</b>	<b>Result</b>		
		a	Are laboratory services available to perform fingerprinting; serologic and/or DNA testing; ballistics; and trace evidence examination?	II	Y	N/A	N
		b	Is the crime laboratory accredited by an Accreditation body who is a signatory to the International Laboratory Accreditation Cooperation (ILAC) Mutual recognition Arrangement (MRA) and offers forensic laboratory accreditation services or a major accreditation body acceptable to NAME?	I	Y	N/A	N
<b>H</b>	<b>3</b>	<b>Microbiology</b>		<b>P</b>	<b>Result</b>		
		a	Does the office have microbiology laboratory services available?	II	Y	N/A	N
		b	Is the microbiology laboratory accredited by the College of American Pathologists (CAP) or equivalent?	II	Y	N/A	N
<b>H</b>	<b>4</b>	<b>Clinical Chemistry</b>		<b>P</b>	<b>Result</b>		
		a	Are routine diagnostic clinical chemistry tests available for analysis of postmortem specimens?	II	Y	N/A	N
		b	Is the clinical chemistry testing performed by a laboratory accredited by the College of the American Pathologists (CAP) or does it have equivalent certification?	II	Y	N/A	N
<b>H</b>	<b>5</b>	<b>Consultations</b>		<b>P</b>	<b>Result</b>		
		a	Does the office arrange for the availability of expert consultants in neuropathology; forensic dentistry/odontology; forensic anthropology; and radiology?	II	Y	N/A	N
		b	Are the consultative services responsive complete, reliable, reputable, and credible in court?	I	Y	N/A	N



<b>H 6</b>		<b>Consultants</b>	<b>P</b>	<b>Result</b>		
	a	Is the office affiliated with a forensic anthropologist board certified by the American Board of Forensic Anthropology (ABFA)?	I	Y	N/A	N
	b	Is the office affiliated with a forensic odontologist board certified by the American Board of Forensic Odontology (ABFO)?	I	Y	N/A	N
	c	Are other consultants (e.g., neuropathologists, pediatric pathologists, radiologists, etc.) formally trained in their respective specialties?	I	Y	N/A	N
	d	Does the office have ready access to legal advice and consultation in matters relating to the interpretation and implementation of its governing statute or statutes and on other (civil) legal matters?	I	Y	N/A	N
	e	Does the office maintain a file documenting the legal advice and consultation that has been received?	I	Y	N/A	N

<b>H 7</b>	<b>Consultation and Laboratory Reports</b>		<b>P</b>	<b>Result</b>		
	a	Are the reports of consultations and laboratory tests pertinent to determining cause and manner of death (ballistics, trace evidence, etc.) incorporated into the official records of the case whenever such tests are performed and when such inclusion is permitted by the consultant's policies and state or local regulations or statutes?	I	Y	N/A	N
	b	Are request forms available for supplemental laboratory and consultative services?	I	Y	N/A	N
	c	Are consultations and laboratory tests tracked and monitored by the office for chain of custody; status of completion; expected return time; billing information; and return of residual specimens, as applicable?	I	Y	N/A	N



Design Criteria  
**Applicable Codes**  
Study Schedule  
Program/Space Needs Lists  
Optional Layout Studies  
Selected Layout Study  
MEP Narrative  
Construction Cost Estimate  
Meeting Notes



Chapter 14 - BUILDINGS AND BUILDING REGULATIONS

ARTICLE I. - IN GENERAL

Sec. 14-1. - Variances from chapter requirements.

The city council shall hear and render judgment on request for variances from the requirements of this chapter. Variances shall only be issued upon a showing of good and sufficient cause; a determination that failure to grant the variance would result in exceptional hardship to the applicant; and a determination that the granting of a variance will not result in increased flood heights, additional threats to public safety, extraordinary public expense, create nuisances, cause fraud on or victimization of the public, or conflict with other ordinances not a part of this chapter. Variances shall only be considered by city council when variances are first considered by the appropriate board, (i.e., electrical board, plumbing board, or building standard commission) and building inspector.

(Code 1972, § 5-1; Ord. No. 580; Ord. No. 621)

Sec. 14-21. - Building code.

A certain document, three copies of which are on file in the office of the city clerk, being marked and designated as the International Building Code, 2003 edition, including appendix chapters A, B, C, E, F, G, H, I, and J, as published by the International Code Council, be and is hereby adopted as the building code of the city for regulating and governing the conditions and maintenance of all property, buildings and structures; by providing the standards for supplied utilities and facilities and other physical things and conditions essential to ensure that structures are safe, sanitary and fit for occupation and use; and the condemnation of buildings and structures unfit for human occupancy and use and the demolition of such structures as herein provided; providing for the issuance of permits and collection of fees therefore; and each and all of the regulations, provisions, penalties, conditions and terms of said building code on file in the office of the city clerk are hereby referred to, adopted, and made a part hereof, as if fully set out in this section, with the additions, insertions, deletions and changes, if any, prescribed in section 14-22 of this article.

(Ord. No. 955, 1-9-2006)

Sec. 14-22. - Revisions to building code.

The following sections are hereby revised:

Section 101.1. Insert: City of La Marque

Section 1612.3. Insert: City of La Marque

Section 1612.3. Insert: February 16, 1983

Section 3410.2. Insert: January 9, 2006

(Ord. No. 955, 1-9-2006)

Sec. 14-23. - Residential code.

A certain document, three copies of which are on file in the office of the city clerk, being marked and designated as the International Residential Code, 2003 edition, including appendix chapters A, B, C, D, E, G, H, J, K and L, as published by the International Code Council, be and is hereby adopted as the residential code of the city for regulating and governing the construction, alteration, movement, enlargement, replacement, repair, equipment location, removal and demolition of detached one- and two-family dwellings and multiple single-family dwellings (townhouses) not more than three stories in height with separate means of egress as herein provided; providing for the issuance of permits and collection of fees therefore; and each and all of the regulations, provisions, penalties, conditions and terms of said residential code on file in the office of the city clerk are

hereby referred to, adopted, and made a part hereof, as if fully set out in this section, with the additions, insertions, deletions and changes, if any prescribed in section 14-24 of this article.

(Ord. No. 955, 1-9-2006)

Sec. 14-24. - Revisions to residential code.

The following sections are hereby revised:

Section R101.1. Insert: City of La Marque

Table R301.2(1). Insert:

Ground Snow Load	Wind Speed (mph)	Seismic Design Category	Subject to Damage From				Winter Design Temp	Ice Shield Underlay Required	Flood Hazards	Air Freezing Index	Mean Annual Temp
			Weathering	Frost Line Depth	Termite	Decay					
0	120 b or c	A	Negligible	6"	Very heavy	Slight to moderate	32	No	Ord. No. 660 11-30-87 2-16-83 Firm and FBFM	9	69.9

Section P2603.6.1. Insert: six inches (6")

Section P2603.6.1. Insert: eighteen inches (18")

Section P3103.1. Insert: twelve inches (12")

(Ord. No. 955, 1-9-2006; Ord. No. 2013-003, § 1, 3-25-2013)

Sec. 14-25. - Fee schedule.

(a) Any person applying for a building permit shall pay to the city, prior to the issuance of the permit, a plan review fee of \$150.00 for single-family residential construction or the following fees for commercial and multi-family construction:

Valuation	Fee
\$1.00 to \$10,000.00	\$50.00
\$10,001.00 to \$25,000.00	\$64.80 for the first \$10,000.00 plus \$5.01 for each additional \$1,000.00
\$25,001.00 to \$50,000.00	\$139.95 for the first \$25,000.00 plus \$3.61 for each additional \$1,000.00

\$50,001.00 to \$100,000.00	\$230.20 for the first \$50,000.00 plus \$2.50 for each additional \$1,000.00
\$100,001.00 to \$500,000.00	\$355.20 for the first \$100,000.00 plus \$2.00 for each additional \$1,000.00
\$500,001.00 to 1,000,000.00	\$1,155.20 for the first \$500,000.00 plus \$1.70 for each additional \$1,000.00
\$1,000,001.00 and up	\$2,005.20 for the first \$1,000,000.00 plus \$1.13 for each additional \$1,000.00

(b) Any person applying for a building permit shall pay to the city, prior to the issuance of the permit, a building permit fee for any improvement based on the following schedule:

Total Improvement Value	Fee
\$0.00 to \$1,000.00	\$15.00
\$1,001.00 to \$50,000.00	\$20.00 for the first \$1,000.00 plus \$5.00 for each additional \$1,000.00
\$50,001.00 to \$100,000.00	\$260.00 for the first \$50,000.00 plus \$4.00 for each additional \$1,000.00
\$100,001.00 to \$500,000.00	\$460.00 for the first \$100,000.00 plus \$3.00 for each additional \$1,000.00
\$500,001.00 to \$1,000,000.00	\$1960.00 for the first \$500,000.00 plus \$2.00 for each additional \$1,000.00
\$1,000,001.00	\$2,660.00 for the first \$100,000.00 plus \$2.00 for each additional \$1,000.00

(c) All other fees that are not noted above are as follows:

Inspection or Permit	Fee
Reinspection fee	\$20.00
Demolition fee	25.00
House moving permit	20.00
Manufactured home permit	15.00

(d) Reinspection fees shall be assessed for each inspection or reinspection when such portion of work for which the inspection is called is not complete, corrections called for are not made or any portion of the structure is inaccessible.

(e) Fees for building work permits.

(1) Any person applying for a building permit shall pay to the city, prior to the issuance of the permit, a plan review fee of \$150.00 for single-family residential construction or the following fees for commercial and multi-family construction:

Valuation	Fee
\$1.00 to \$10,000.00	\$75.00
\$10,001.00 to \$25,000.00	\$75.00 for the first \$10,000.00 plus \$5.00 for each additional \$1,000.00
\$25,001.00 to \$50,000.00	\$150.00 for the first \$25,000.00 plus \$5.00 for each additional \$1,000.00
\$50,001.00 to \$100,000.00	\$275.00 for the first \$50,000.00 plus \$5.00 for each additional \$1,000.00
\$100,001.00 to \$500,000.00	\$525.00 for the first \$100,000.00 plus \$5.00 for each additional \$1,000.00
\$500,001.00 to 1,000,000.00	\$2,525.00 for the first \$500,000.00 plus \$5.00 for each additional \$1,000.00
\$1,000,001.00 and up	\$5,025.00 for the first \$1,000,000.00 plus \$5.00 for each additional \$1,000.00

(2) Any person applying for a building permit shall pay to the city, prior to the issuance of the permit, a building permit fee for any improvement based on the following schedule:

Total Improvement Value	Fee
\$0.00 to \$1,000.00	\$25.00
\$1,001.00 to \$50,000.00	\$25.00 for the first \$1,000.00 plus \$5.00 for each additional \$1,000.00
\$50,001.00 to \$100,000.00	\$260.00 for the first \$50,000.00 plus \$5.00 for each additional \$1,000.00
\$100,001.00 to \$500,000.00	\$470.00 for the first \$100,000.00 plus \$4.00 for each additional \$1,000.00
\$500,001.00 to \$1,000,000.00	\$2,070.00 for the first \$500,000.00 plus \$3.00 for each additional \$1,000.00
\$1,000,001.00	\$3,570.00 for the first \$1,000,000.00 plus \$3.00 for each additional \$1,000.00

Registration Fee

\$65.00 for the first year and \$25.00 each year after

**Demolition Fee**

\$25.00 per structure

**Manufactured Home Permit**

\$15.00 per structure

**House Moving Permit**

\$100.00 per structure

**Re-inspection Fee—Building Inspector**

\$25.00 for the first re-inspection

\$50.00 for the second re-inspection

\$100.00 for the third re-inspection and each inspection thereafter

**After-hours inspections**

\$100.00 per inspection per request

(Ord. No. 955, 1-9-2006; Ord. No. O-2012-1070, § 1, 12-10-2012)

**Sec. 14-26. - Article not to affect any suit, etc.**

Nothing in this article or in the building code or residential code hereby adopted shall be construed to affect any suit or proceeding impending in any court, or any rights acquired, or liability incurred, or any cause or causes of action acquired or existing, under any act or ordinance hereby repealed as cited in Ord. No. 955; nor shall any just or legal right or remedy of any character be lost, impaired or affected by this article.

(Ord. No. 955, 1-9-2006)

**Sec. 14-27. - General and building contractors; liability insurance requirements.**

- (a) No permit shall be issued for any general or building contracting working, as such work is defined within the International Building Code, adopted in section 14-21, until the general or building contractor or his employer shall have arranged to carry the following insurance:
- (1) Worker's compensation insurance on each and every one of his employees as required and in accordance with the provisions of the state Workers' Compensation Act;
  - (2) Public liability insurance to the extent of \$50,000.00 for any one accident, and \$100,000.00 for any one person; and
  - (3) Property damage insurance to the extent of \$10,000.00 for any one accident, and \$100,000.00 in the aggregate.
- (b) Such insurance shall be written by an accredited company under the supervision of the board of insurance commissioners of the state.
- (c) Evidence of compliance with the insurance requirements of subsections (a) and (b) of this section shall be considered as having been met when the policy, a copy thereof, or a certificate of insurance has been filed with and approved by the building official of the city. Such policy shall include an endorsement thereon that the building official will be notified at least ten days in advance in the event of the policy being cancelled or expiring before the expiration date of the license.

(Ord. No. 978, § 1, 2-12-2007)

Secs. 14-28—14-57. - Reserved.

### ARTICLE III. - ELECTRICIANS

#### DIVISION 1. - GENERALLY

Sec. 14-58. - Title.

This article shall be known as the "La Marque Electrical Code" and it may be so cited.

(Code 1972, § 5-31)

Sec. 14-59. - Definitions.

For the purposes of this article, the following definitions shall apply, unless indicated to the contrary:

**Electrical contractor.** An "electrical contractor" is any person who contracts for and engages in the business of installing, maintaining, altering, repairing or erecting any electrical wiring, apparatus, devices, appliances, fixtures, or equipment for which a permit is required under the terms and provisions of this article.

**Electrical maintenance work.** "Electrical maintenance work" shall mean the keeping in safe repair of any and all electrical installations, apparatus and equipment, and the keeping in safe repair or moving and relocating the electrical equipment within a building or in or on the premises where a maintenance electrician is regularly employed on a permanent basis, for which a work permit is required under the terms and provisions of this article, but not including the installation of new and additional electrical work, electrical equipment or electrical apparatus.

**Electrical sign contractor.** An "electrical sign contractor" is any person who contracts for and engages in the business of installing, maintaining, wiring, altering, repairing or erecting electric signs, including gas or vacuum signs, gas or vacuum decorations or gas or vacuum illuminating signs or systems.

**Electrical work.** The term "electrical work" means installing, maintaining, altering, preparing or erecting any electrical wiring, apparatus, devices, appliances, fixtures or equipment for which a permit is required under the terms and provisions of this article.

**Journeyman electrician.** A "journeyman electrician" is a person employed by an electrical contractor and working under the supervision of a master electrician.

**Maintenance electrician.** A "maintenance electrician" is a person regularly employed on a permanent basis to perform electrical maintenance work in the building or on the premises where he is employed.

**Master electrician.** A "master electrician" is a person licensed under this article to perform electrical work as herein defined.

**Master sign electrician.** A "master sign electrician" is a person licensed as such under this article to perform the work authorized by the license.

(Code 1972, § 5-32; Ord. No. 226, §§ 4, 6—8, 10—12)

Secs. 14-60, 14-61. - Reserved.

**Editor's note—** Ord. No. O-2012-1058, §§ 1, 2, adopted March 26, 2012, amended the Code by repealing former §§ 14-60 and 14-61 in their entirety. Former § 14-60 pertained to the electrical board, and derived from the Code of 1972, § 5-33; Ord. No. 226; Ord. No. 369; Ord. No. 494; Ord. No. 484; Ord. No. 615; and Ord. No. 1000, adopted June 23, 2008. Former § 14-61 pertained to appeal from action of electrical board, and derived from the Code of 1972, § 5-34; and Ord. No. 226.

Sec. 14-62. - General duties of electrical inspector.

It shall be the duty of the electrical inspector, or any duly authorized assistant, to inspect all electrical wiring, apparatus, or equipment for the utilization of the service supply company in providing electrical energy for lights, heat and power inside of or attached to a building or other structure within the limits of the city and to enforce all laws, rules and regulations pertaining to the same.

(Code 1972, § 5-35; Ord. No. 226, § 30; Ord. No. 615)

Sec. 14-63. - Electrical inspector not to have conflicting interests.

It shall be unlawful for the electrical inspector to engage in any electrical work requiring his inspection.

(Code 1972, § 5-36; Ord. No. 226, § 22)

Sec. 14-64. - Records to be kept by electrical inspector.

The electrical inspector shall keep records of all permits issued, inspections and reinspections made and other official work performed in accordance with the provisions of this article.

(Code 1972, § 5-37; Ord. No. 226, § 22)

Sec. 14-65. - Inspection and approval of new work.

- (a) All work for which a permit is required by this article shall be inspected by the electrical inspector.
- (b) If, upon making an inspection of any electrical wiring or equipment, the same is found to have been installed in a satisfactory manner and in accordance with the provisions of this article, the electrical inspector shall place a notice at the service switch or other suitable place, stating that the electrical work has been inspected and found to be in accordance with the rules as prescribed in this article.
- (c) It shall be unlawful for any person to lath, seal, or in any manner conceal any electrical wiring or equipment until the same has been inspected and the notice posted as required in this section. If so concealed, the wiring shall be uncovered to permit necessary inspection. In large and complicated jobs, the work may be inspected and tested in sections, on the approval of the electrical inspector.
- (d) It shall be unlawful for any person to use any electrical current in or through any wiring apparatus or fixtures installed for the utilization of the service of the supply company in providing electrical energy for lights, heat or power in or on any building or structure within the limits of the city, until the same shall have been inspected and approved by the electrical inspector.

(Code 1972, § 5-38; Ord. No. 226, § 30; Ord. No. 615)

Sec. 14-66. - Permission to furnish current to new installations.

It shall be unlawful for any electrical supply company or any person furnishing electrical current for light, heat and power to connect his or its distribution system with any installation of wiring apparatus or fixtures installed in or to any building or other structure within the limits of the city, without first having received written permission from the electrical inspector to furnish current for such wiring, apparatus or fixtures. Such permission shall be given by the electrical inspector at any time after the installation has been inspected and approved in accord with section 14-65. The electrical inspector may, before such approval, give temporary permission to connect and furnish electric service to any wiring, apparatus or fixtures for a period of time not exceeding 30 days, if, in his opinion, such wiring, apparatus or fixtures are in such condition that current may be safely connected therewith, and there exists an urgent necessity for such use, when written application is filed with him requesting such permission.

(Code 1972, § 5-39; Ord. No. 226, § 30)

Sec. 14-67. - Electrical inspector's right of entry and right to disconnect current generally.

The electrical inspector and any of his assistants shall have the right, upon exhibition of proper identification if requested, to enter any building in the discharge of his official duties or for the purposes of making any inspection, reinspection or test of the installation of electrical wiring, apparatus, devices, appliances, fixtures and electrical equipment contained therein, and shall have the authority to cause the turning off of all electrical current and to cut or disconnect, in cases of emergency, any wire where such electrical current is dangerous to life and property or where such wires may interfere with the work of the fire department. The electrical inspector is hereby empowered, in emergencies, to disconnect and to order the disconnection of electrical service to any electric wiring, apparatus, device, appliance, fixture or equipment found to be dangerous to life or property because of its being defective or defectively installed or otherwise not in conformity with the provisions of this article, until such wiring, apparatus, device, appliance, fixture and equipment and their installation have been made safe as directed by him in conformity to this article.

(Code 1972, § 5-40; Ord. No. 226, § 23)

Sec. 14-68. - Correction of defects in interior wires and apparatus; correction or connection of defective conductors and appliances.

- (a) The electrical inspector or any duly authorized assistant is hereby empowered to inspect or reinspect all interior wires and apparatus conducting or using electric current for lights, heat or power, and when such conductors or apparatus are found to be unsafe to life or property, he shall notify the person owning, using or operating them to place the same in a safe and secure condition within 72 hours or within such further time as the inspector shall determine is necessary. Any person failing or refusing to repair or remove the same within 72 hours or within such further time as the inspector shall determine is necessary, after the receipt of such notice, shall be subject to the penalty provided for the violation of this article.
- (b) Whenever any electrical conductor or appliance used for any purpose in or on a building is, in the opinion of the electrical inspector, contrary to the provisions of this article, he shall cause written notice to be served on the person using such a conductor or appliance to discontinue the use of same and to correct the defective condition, hazards or violation of this article within 48 hours or within 30 days, as he may decree necessary and upon failing to conform with such notice, the inspector is hereby authorized and directed to cause the electrical service wires supplying such unsafe conductor or appliance to be disconnected.

(Code 1972, § 5-41; Ord. No. 226, § 30)

Sec. 14-69. - Contractor's bond.

Each electrical contractor and electrical sign contractor licensed under this article shall furnish a bond, payable to the city, in the amount of \$5,000.00, with a good and sufficient corporate surety subject to the approval of the city council. Such bond shall be on a form approved by the city attorney and shall be conditioned that such contractor will comply with the laws and ordinances relating to electrical wiring by his or his employee's or agent's negligence or failure to comply with such laws or ordinances.

(Code 1972, § 5-42; Ord. No. 226, § 38; Ord. No. 494; Ord. No. 615)

Sec. 14-70. - Maintenance electricians to give notice of change of employment.

Every holder of a maintenance electrician's license under this article shall notify the electrical inspector immediately when such holder makes any change in his employment, giving in such notice the name of his new employer and the location of the premises in or on which he is to be employed to perform maintenance electrical work.

(Code 1972, § 5-43; Ord. No. 226, § 13)

Sec. 14-71. - Bridging, tampering with or altering fuses or circuit breakers.

It shall be unlawful for any person to bridge, tamper with or change from its original installation, except upon the approval of the electrical inspector and then only after a proper permit for the alteration has been issued, any fuse of the plug, cartridge or link type, installed in panel boards, main switches or switchboards, or to alter or change circuit breakers so that the original calibration will be affected or to tie down or secure any circuit breaker so that it will not function properly.



(Code 1972, § 5-44; Ord. No. 226, § 25)

Sec. 14-72. - Article does not affect liability for damages.

This article shall not be construed to relieve from or lessen the responsibility of any person owning, operating or controlling any electric wiring, apparatus, devices, appliances, fixtures or equipment for damages to persons or property caused by any defect therein, nor shall the city be held as assuming, by this article, any such liability by reason of the inspections authorized herein or the certificates of approval issued as herein provided, or otherwise.

(Code 1972, § 5-45; Ord. No. 226, § 38)

Sec. 14-73. - Penalty for violations of article.

Any person violating any of the provisions of this article shall, upon conviction, be punished as prescribed in section 1-7 of this Code for each offense.

(Code 1972, § 5-46; Ord. No. 226, § 39)

Sec. 14-74. - Appeal from action of the electrical inspector.

Any person dissatisfied with a decision of the electrical inspector shall have the right to appeal to the electrical board from any action of the electrical inspector within ten days from the action appealed from, which appeal shall be perfected by addressing a letter to the electrical board stating that an appeal from the ruling of the electrical inspector is desired. Upon receipt of notice of such appeal, the electrical board shall set time for a hearing and shall notify the appellant and the electrical inspector of the date of such hearing. The electrical inspector as well as the appellant, shall have the right to be heard at such hearing and the electrical board shall have the right to make recommendation to council to affirm, modify, or reverse the action or decision complained of.

(Code 1972, § 5-47; Ord. No. 615)

Secs. 14-75—14-91. - Reserved.

## DIVISION 2. - LICENSE FOR ELECTRICAL CONTRACTORS AND ELECTRICIANS

### FOOTNOTE(S):

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State Law reference— Municipal regulation of electricians, V.T.C.A. Occupations Code § 1305.201; scope of municipal license, V.T.C.A., Occupations Code § 1305.202.

Sec. 14-92. - Required; exceptions.

- (a) It shall be unlawful for any person to engage in the business of an electrical contractor or an electrical sign contractor or to do or perform, or assist in the doing or performing of, any electrical work within the city, unless he holds a current state license, of the appropriate class, issued in accordance with the provisions of this division.
- (b) No electrical contractor or electrical sign contractor shall send any person on any job in the capacity of an electrician, unless such person is the holder of and is in possession of a state license of the appropriate class issued under this division.
- (c) No license shall be required for any person to perform electrical work on his own homestead premises, provided all such work is performed by himself, for himself, without compensation, and no person shall be employed to assist him in any way on such work.

(Code 1972, § 5-56; Ord. No. 226, §§ 4, 28, 29; Ord. No. 615)

Sec. 14-93. - Classifications.

Licenses required by the provisions of this division shall be those licensing classifications established in state law for electricians.

Secs. 14-94—14-114. - Reserved.

DIVISION 3. - WORK PERMIT

Sec. 14-115. - Required; exceptions.

- (a) A permit shall be required to do electrical construction, install any electrical wiring, apparatus or equipment, or make extensions or changes to existing wiring systems installed for the utilization of the service of the supply company in providing electrical energy for lights, heat or power within or attached to any building. It shall be unlawful for any person to perform any such work without first obtaining such permit.
- (b) Notwithstanding the provisions of subsection (a) above, no permit shall be required for:
  - (1) Replacing fuses or lamps or the connection of portable devices to suitable receptacles which have been permanently installed or for repairs to portable appliances.
  - (2) Minor repair work, such as repairing or replacing flush and snap switches, receptacles and lamp sockets, or minor repairs on permanently connected electric apparatus, appliances, fixtures or equipment, or the installation of light globes.
  - (3) The installation, maintenance or alteration of equipment, or wiring by or for communication agencies, except that a permit shall be required for installations for heating, decoration, amusement, elevator and ventilating equipment, and general lighting and air conditioning not attached to and not directly used in connection with installations for signals and the transmission of intelligence.
  - (4) The installation of temporary wiring, apparatus, devices, appliances or equipment used by a recognized school in teaching electricity.
  - (5) The installation and connection or disconnection and removal of meters, meter-related connections, and protective devices by a public service company furnishing electrical current to the public, under a franchise granted by the city, for lighting, heating or power.
- (c) All such work and installations shall, however, conform with all other applicable provisions of this article.

(Code 1972, § 5-74; Ord. No. 226, §§ 24, 25, 34; Ord. No. 369, § 4; Ord. No. 804)

Sec. 14-116. - Application.

Application for a permit required by this division, describing the work to be done, shall be made in writing to the electrical inspector by a person authorized to receive such permit. The application shall be accompanied by such plans, specifications and schedules as may be necessary to determine whether the installation, as described, will be in conformity with the requirements of this article.

(Code 1972, § 5-75; Ord. No. 226, §§ 24, 25)

Sec. 14-117. - Qualifications of applicant.

A permit required by this division shall be issued only to:

- (1) An electrical contractor or an employee or associate of such contractor authorized by him to obtain a permit in his name.

- (2) An electrical sign contractor; provided that, such permit shall be issued only for wiring, installing and connecting electric signs, including gas or vacuum signs, gas or vacuum decorative systems, or gas or vacuum illuminating systems.
- (3) A maintenance electrician; provided that, such permit shall be issued only for work authorized by such license.
- (4) A homeowner to perform work authorized by section 14-92; however, such permit will only be issued to a homeowner once in a three-year period.

(Code 1972, § 5-76; Ord. No. 226, §§ 16, 24, 25, 27; Ord. No. 615)

Sec. 14-118. - Fee.

The fee for permits required by this division shall be as determined from time to time by ordinance.

(Code 1972, § 5-77; Ord. No. 226, § 26; Ord. No. 402; Ord. No. 494; Ord. No. 615; Ord. No. 751, § 1)

Sec. 14-119. - Issuance; new permit for changes or additions.

The electrical inspector shall issue a permit required by this division, when the applicant has complied with all applicable provisions of this article and if the electrical inspector determines that the work to be authorized by such permit will be performed in compliance with this article. Such permit shall cover only the work described in the application, and any changes or additions must be authorized by additional permits.

(Code 1972, § 5-78; Ord. No. 226, §§ 24, 25)

Sec. 14-120. - Emergency permit.

- (a) The electrical inspector may issue and enforce any rules or regulations he may deem necessary covering the granting of emergency permits for electrical work, where real emergencies exist.
- (b) Emergency wiring may be permitted by the electrical inspector for a period not to exceed 30 days, at which time such emergency wiring or service must be removed. If service is required for a longer period on large construction jobs only, such service or emergency wiring shall be reinspected and a fee as established from time to time by ordinance shall be charged for reinspection each 90 days thereafter. Emergency wiring permit applications must be accompanied by a letter to the electrical inspector, signed by both the electrical contractor and by the owner or occupant of the building or premises, stating the period for which emergency wiring is desired and signifying that emergency work will be promptly removed after expiration of the emergency permit.

(Code 1972, § 5-79; Ord. No. 226, §§ 25, 32; Ord. No. 369, § 8)

Sec. 14-121. - Violation of article or other ordinances.

The issuance of a permit under this division will not be taken as permission or as a license to violate any of the requirements of this article or any other ordinance of the city.

(Code 1972, § 5-80; Ord. No. 226, § 25)

Sec. 14-122. - Posting.

On all installations, the permit for electrical work shall be displayed in a readily accessible location, as directed by the electrical inspector, throughout the time the installation covered by the permit is being installed. Where wiring, apparatus, devices, appliances, fixtures or equipment are added to previous installations, or where changes are made on wiring, apparatus, devices, appliances, fixtures or equipment, the permit for such work shall be posted on the building or structure, as directed by the electrical inspector, before the work is started.

(Code 1972, § 5-81; Ord. No. 226, § 25; Ord. No. 369, § 5)

Sec. 14-123. - Refusal of permittee to complete work.

Should any person to whom a permit is issued under this division refuse to complete any work in accordance with the provisions of this article, it shall be the duty of the electrical inspector to report such fact to the owner of the premises and to the city manager. Until such work has been completed in compliance with this article, it shall be the duty of the electrical inspector to refuse to issue further permits to such person.

(Code 1972, § 5-82; Ord. No. 226, § 5)

Sec. 14-124. - Annual permit for maintenance work.

- (a) An annual permit shall be required of and, upon application therefor, shall be issued to any person employing an electrician performing electrical maintenance work. The application of such permit shall be made in writing to the electrical inspector and shall contain a description of the premises on which work is to be done under the permit and information concerning the type of work to be done on such premises under such permit. The fee for such annual permit shall be as determined from time to time by ordinance and such permit shall expire on December 31 next following its issuance.
- (b) If requirements of the annual permit as herein set forth are not met, or if work is not done in compliance with this article, the electrical inspector shall suspend all rights conveyed by such permit until such time as all deficiencies have been corrected or the permit expires. Notice of such suspension shall be in writing to the person to whom the permit was issued.
- (c) A permit in accordance with the other provisions of this division shall be required for all moving and relocating of electrical equipment done by a maintenance electrician.

(Code 1972, § 5-83; Ord. No. 226, § 14)

Secs. 14-125--14-146. - Reserved.

DIVISION 4. - TECHNICAL REQUIREMENTS

Sec. 14-147. - National Electrical Code adopted.

All electrical construction and all materials and appliances used in connection with the installation, maintenance, and operation of electrical wiring apparatus or equipment for the utilization of service in providing electrical energy for light, heat or power inside the city shall conform to the provisions of the National Electrical Code, current edition, together with all future amendments, sponsored by the National Fire Protective Association, and such future editions thereof that are recommended for approval by the city electrical board to the city council, which are adopted by motion of the city council, such National Electrical Code being expressly adopted as a part hereof to the same extent as if set out at length herein, except that in the event of any conflict or inconsistency between the provisions of such code and any provision of this article, the latter shall prevail.

(Code 1972, § 5-91; Ord. No. 226, § 37; Ord. No. 327, § 1; Ord. No. 369, § 1; Ord. No. 380, § 1; Ord. No. 425, § 1; Ord. No. 494; Ord. No. 615)

State Law reference— National electrical code applicable statewide for residential construction, V.T.C.A., Local Government Code § 214.214.

Sec. 14-148. - Approved wiring methods designated.

The following are hereby designated as approved wiring methods:

Method A: Standard rigid steel conduit.

Method B: Metal under floor raceways.

- Method C: Nonmetallic sheathed cable.
- Method D: Flexible steel conduit 1/2" minimum.
- Method E: Approved cable.
- Method F: Armored cable-lead sheathed.
- Method G: Surface metal raceways.
- Method H: Electrical metallic tubing.
- Method I: Knob and tube used only where provided by this division.
- Method J: PVC Schedule #40.

(Code 1972, § 5-92; Ord. No. 226, § 31; Ord. No. 327, § 2)

Sec. 14-149. - Authorization for special wiring methods.

The electrical inspector may with the approval of the electrical board, authorize the installation of special wiring methods which are in general conformity with this article or which are experimental in nature for possible adaption to this Code.

(Code 1972, § 5-93; Ord. No. 226, § 26; Ord. No. 369, § 7)

Sec. 14-150. - One hundred ten-volt circuits installed below flood level.

All 110-volt circuits installed below flood level as defined in Ordinance No. 439 (the Flood Damage Prevention ordinance) must be on G.F.I. breakers.

(Code 1972, § 5-93.1; Ord. No. 494)

Sec. 14-151. - Buildings of mixed occupancy to be wired as commercial buildings.

New buildings of mixed occupancy (residential and commercial) shall be classed as commercial buildings and shall be wired as such, according to the rules and regulations of this article and of the code adopted by section 14-147.

(Code 1972, § 5-94; Ord. No. 226, § 37)

Sec. 14-152. - Conduit connections to rotating or movable apparatus.

Method D, as designated in section 14-148, shall be used for conduit connections to rotating or movable apparatus, if the length is six feet or less.

(Code 1972, § 5-95; Ord. No. 226, § 31)

Sec. 14-153. - Drop cords not to be used in closets.

Drop cords shall not be installed in clothes closets or in places where wearing apparel is likely to be hung. Approved ceiling fixtures shall be used.

(Code 1972, § 5-96; Ord. No. 226, § 31)

Sec. 14-154. - Minimum size of nonmetallic sheathed cable.

In no case shall nonmetallic sheathed cable of a size smaller than No. 12 AWG wire be used.

(Code 1972, § 5-97; Ord. No. 226, § 31)

Sec. 14-155. - Service connections.

- (a) The service conduit and wires leading from the outside of the customer's building to the meter cabinet and main line switch shall be supplied, owned and controlled by the property owner, but the installation of service drops and the connection of these wires to the supply lines shall be made by the electric public service company owning and operating the supply lines. The owner must provide a location for brackets or other attachments to the building to which the service wires are to be connected. Such a location must not be more than 18 inches from the service conduit outlet. On residences of two or more stories, the location shall be as is practical on the building, but in no event shall it be more than 25 feet or less than ten feet from the ground and it must be located so as not to be within reach from any porch or stair landing.
- (b) Service conduit extending through the roof and used for a service support shall be a minimum two-inch galvanized rigid conduit, sealed at the roof with an approved flashing and extend a minimum of 18 inches and maximum of 36 inches above the roof. Such service conduit shall be anchored just before entering the roof. A 2½ inch conduit shall extend a maximum of 40 inches above the roof support.
- (c) Electrical metallic tubing shall not be used for service entrance conductors.

(Code 1972, § 5-98; Ord. No. 226, § 33; Ord. No. 369, § 9; Ord. No. 380, § 2; Ord. No. 615)

Sec. 14-156. - Reserved.

Editor's note— Ord. No. 615, adopted Aug. 12, 1985, repealed § 5-99, which section set out prohibited locations for service entrance switches and service equipment, and was derived from Ord. No. 226, § 37.

(Code 1972, § 5-99)

Sec. 14-157. - Meters.

- (a) All meter loops for the installation of electric meters to measure the service rendered by the electric public service company shall be in meter cabinets approved by the electric public service company and installed by the owner or his agent. Such meter loops must be ahead of or on the line side of the main line switch.
- (b) Meters installed to measure the service rendered to residences, apartments and combination residences and commercial or industrial establishments shall be set on the outside of the building at a point not more than six feet or less than five feet from the ground to the dial of the meter. Closed-in rear or front porches are not considered as an outdoor location.
- (c) For convenience of ready access, all meter cabinets shall be located on outside walls of buildings nearest the point of service, except that, in cases where exposure to mechanical injury by vehicles, as in a commercial section, or the nature of the premises, make such location impractical, the location shall be designated by the electrical inspector, after consultation with the power company.
- (d) Where changes or additions are being made to existing electrical installations, necessitating changes or additions to the service entrance or to the service switch of the meter loop, the service entrance conduit and main line switch and meter loop shall be changed to conform to the provisions of this article.
- (e) Where meters are not installed at inaccessible places in houses or buildings and the electric public service company desires to relocate the meter loop for the convenience in rendering its service or for the purpose of standardization of its service in the public interest, it may, upon request to the electrical inspector, have a licensed electrical contractor reinstall the meter loop at a point desired by it and all such work so done at the request of the electric public service company shall be performed at its own expense, without cost to the owner.

(Code 1972, § 5-100; Ord. No. 226, § 34; Ord. No. 804)

Sec. 14-158. - Maximum current.

- (a) Not more than ten current outlets shall be connected to a 20 ampere general use branch circuit.

- (b) Not more than two current outlets shall be connected to a 20 ampere appliance circuit in a kitchen.
- (c) Not more than four heavy duty lamp holders shall be connected to a 20 ampere lighting circuit.

(Code 1972, § 5-101; Ord. No. 226, § 35; Ord. No. 615.)

Sec. 14-159. - Reserved.

**Editor's note**— Section 5-102, relative to enclosing ground conductors and as derived from Ord. No. 226, § 36, was repealed by Ord. No. 615, adopted Aug. 12, 1985.

(Code 1972, § 5-102)

Sec. 14-160. - Interior or exterior wiring.

Aluminum conductors shall not be used for interior or exterior wiring.

Electrical metallic tubing shall be permitted in accordance to section 14-148 method H as an approved wiring method. However it shall not be installed in outside applications.

Electrical meters shall be installed in accordance with section 14-157 of this Code. In addition there shall be an outside main disconnect on the load side of the meter in accordance with the adopted National Electric Code.

Metal-clad (MC) cable drops shall not exceed 25 feet in length. Metal-clad (MC) cable lateral runs shall not exceed 25 foot runs. In addition there shall be no home runs.

Electrical circuits shall not be looped from fixture to fixture. "Daisy Chaining" shall be prohibited.

(Ord. No. 1037, 9-27-10)

Secs. 14-161—14-186. - Reserved.

#### ARTICLE IV. - PLUMBING

#### FOOTNOTE(S):

-- (3) --

**State Law reference**— Municipal authority concerning house plumbing and draining, V.T.C.A., Local Government Code § 214.012.

Sec. 14-187. - Plumbing code adopted; applicability.

- (a) The International Plumbing Code (2003), as amended and on file in the office of the city building inspector, is hereby adopted as the plumbing code for all nonresidential construction and buildings for the City of La Marque, all installations, including alterations, repairs and replacement of plumbing piping, fittings, fixtures, equipment and appurtenances, which may be connected to the City of La Marque water or sewerage system shall be regulated in accordance with the said International Plumbing Code (2003) and amendments as above set out and hereby adopted, except for the changes herein.
- (b) Plumbing regulations and requirements within the International Residential Code constitute the plumbing code for residential construction.

(Code 1972, § 5-114; Ord. No. 625, § 1)

Sec. 14-188. - Reserved.

**Editor's note—** Ord. No. O-2012-1058, § 3, adopted March 26, 2012, amended the Code by repealing former § 14-188 in its entirety. Former § 14-188 pertained to the plumbing board, and derived from the Code of 1972, § 5-115; Ord. No. 625; Ord. No. 995, adopted February 25, 2008.

**Sec. 14-189. - Plumbing inspector generally; duties.**

This section shall supersede any provisions in the International Plumbing Code concerning the office and duties of the plumbing inspector.

- (1) **Plumbing inspector.** The city building inspector as provided by section 2-40 of the city Code of Ordinances, shall be the city official to administer and enforce this code. The city manager shall appoint the plumbing inspector and any assistants necessary to aid him in the discharge of his duties. Such appointment shall be subject to confirmation by the city council. The person chosen to fill this office shall be of good moral character; shall be possessed of such executive ability, training and experience as is required for the performance of his duties in the enforcement of this code. He shall receive such compensation and serve for such term as may be fixed by the governing body. He shall hold and keep in force a plumbing inspector's license issued by the state board of plumbing examiners.
- (2) **Duties of inspector.** The duties of the plumbing inspector or assistant plumbing inspector in addition to other duties set out herein shall be to receive, approve and countersign either in person or by an authorized representative, all applications and collect all fees for permits to do plumbing, or make sewer connections in the city, or outside the boundaries of the city, if connections are made to either the city water or sewer systems; also to personally inspect and pass on all plumbing work, and sewer connections now in use or being constructed, or which may hereafter be constructed in the city, or outside the boundaries of the city, if connections are made to either the city water or sewer systems, and to issue the same, or, if he shall not approve the same, to direct, by written order, the owner or agent in charge of any building premises, where imperfect plumbing, including water, sewer or gas piping, may be located, or the plumber in charge of such construction to stop use or construction of the same until it shall have been properly repaired or constructed in accordance with the provisions of this code; to investigate all alleged violations of the plumbing ordinances; to file complaints against all persons whom he may have reason to believe have violated any of the plumbing or sewer ordinances of the city. Assistant inspectors of plumbing shall perform all of the duties and have all of the powers of the plumbing inspector.

(Code 1972, § 5-116; Ord. No. 625, § 3 (A), (B))

**Sec. 14-190. - Powers of plumbing inspector.**

- (a) This section shall supersede all provisions in the International Plumbing Code concerning the powers of the plumbing inspector.
- (b) The plumbing inspector shall have the power and it shall be his duty, where any building, premises or construction contains improper or defective plumbing or where same has been constructed, erected, altered, or repaired without a permit as provided by this code, to give prompt written notification to the utility involved to cut off the water or gas supply thereto until such improper or defective plumbing shall be made to comply fully with the provisions of this code, and a certificate to the plumbing inspector shall have been issued.

(Code 1972, § 5-117; Ord. No. 625, § 3(c))

**Sec. 14-191. - Permits.**

Section 106 of the International Plumbing Code shall be deleted and the following shall be substituted:

- (1) **Plumbing permits issued.** The plumbing inspector or his designated representative shall issue all plumbing permits in accordance with the provisions and requirements of this code. All applications for permits shall give the correct location of the building, name of the owner of such building and a complete statement of the work and fixtures to be installed. The plumbing inspector may require a complete plan of the work to be performed if considered necessary. All applications submitted by persons claiming exemption from licensing requirements of this section must contain sufficient information to reasonably establish such exemption.
- (2) **Special permit.** A special permit may be issued by the plumbing inspector, in writing, when plumbing cannot be installed in accordance with all of the provisions of this Code, if in his judgment the conditions require it. Application



for this type permit shall be made in writing accompanied by a sketch showing the work to be done; said sketch must be kept on file in the plumbing inspector's office. In other work pertaining to, but not specifically covered by this code, the plumbing inspector may prescribe such specifications as may be necessary and shall be consulted before any work is started.

- (3) To whom permits shall be issued. Permits shall be issued only to the following:
  - a. Any master plumber licensed by the state board of plumbing examiners.
  - b. Any property owner for plumbing work to be done by him in a building owned or occupied by him as his home.
  - c. Any appliance dealer or employee of any appliance dealer who is acting as an appliance installation man or appliance service man in connecting appliances to existing piping installations.
  - d. Anyone who is regularly employed as or acting as a maintenance man or maintenance engineer, incidental to and in connection with the business in which he is employed or engaged, and who does not engage in the occupation of a plumber for the general public.
- (4) Licenses required. All persons who engage in or work at the actual installation, alteration, repair and renovating of plumbing shall possess either a master or journeyman plumber's license or an apprentice registration card in accordance with the provisions of the state plumbing license law.
- (5) Exceptions to license. Licenses shall not be required of the following: plumbing work done by a property owner in a building owned or occupied by him as his home; plumbing work done by anyone who is regularly employed as or acting as a maintenance man or maintenance engineer, incidental to and in connection with the business in which he is employed or engaged and who does not engage in the occupation of a plumber for the general public; construction, installation and maintenance work done upon the premises or equipment of a railroad by an employee thereof who does not engage in the occupation of a plumber for the general public; and plumbing work done by persons engaged by any public service company in the laying, maintenance and operation of its service mains or lines and the installation, alteration, adjustment, repair, removal and renovation of all types of appurtenances, equipment and appliances; appliance installation and service work done by anyone who is an appliance dealer or is employed by an appliance dealer, and acting as an [sic] appliances to existing piping installations. Provided, however, that all work and service herein named or referred to shall be subject to inspection and approval in accordance with the terms of all local valid city or municipal ordinances.
- (6) Conditions of permits. Each permit issued under this code shall be personal to the permittee. No such permit shall be assigned or transferred to another person and no person shall permit another person to obtain a permit in his name, or permit any plumbing or gas-fitting work to be performed under his permit by any person other than a person authorized to do the same.

Any person who shall willfully make any false statement in order to obtain a permit shall be guilty of a misdemeanor and subject to the penalty provided herein. Bad faith or unreasonable delay in the performance of plumbing work shall be deemed a sufficient reason for subjecting the plumber so offending to a suspension of the permit and no further permit shall be issued until such act of bad [faith] or unreasonable delay has been corrected.

Every permit issued under the provisions of this Code shall expire 90 days after the date thereof unless work authorized by such permit shall have been commenced within such time; and every permit shall expire if the work authorized by such permit is suspended or abandoned for as long as 90 days after it has been commenced. Extensions may be granted by the plumbing inspector upon written application from the permitted.

(Code 1972, § 5-118; Ord. No. 625, § 4; Ord. No. 667, § 1)

Sec. 14-192. - Application for permit.

- (a) Permits required. It shall be unlawful to construct, install or cause to be installed any plumbing as defined herein without first securing a plumbing permit therefor, except as otherwise provided in this section. It shall be unlawful for any person to make any extension to any lines or pipes, using water from city water mains, whether within or without the corporate limits of the city, or to add any pipes or to change any pipes or lines from a water line, apartment, house, premises, or meter without first securing a permit for such changes except as otherwise provided in this section. Permits and inspections shall be required for the replacement of commercial water heaters. No plumbing permit is required, however, to do minor repairs such as the maintenance or replacement in kind of the following:

- (1) Yard hydrants and sill cocks.
- (2) Flush valves and float-balls in water closet tanks.
- (3) Accessible traps on lavatories or sinks.
- (4) Replacing of plumbing fixtures where no change in "roughing-in" is involved except replacement of commercial water heaters.

The above examples are representative only and should not be considered as a limitation on the term "minor repairs."

- (b) **Bond; insurance.** As a condition to issuance of a permit to anyone who is regularly employed as or acting as a maintenance man or maintenance engineer, incidental to and in connection with business in which he is employed or engaged, and who does not engage in the occupation of a plumber for the general public, the applicant must deposit with the city a good and sufficient bond in the sum of \$2,000.00, conditioned that the applicant for such permit will faithfully observe all the laws pertaining to plumbing; further, that the city shall be indemnified and saved harmless from all claims arising from accidents and damage of any character whatsoever caused by the negligence of such applicant, or by any other unfaithful, inadequate work done either by such applicant or by the applicant's agents or employees. In addition, such applicant shall maintain in full force and effect general liability insurance in a form acceptable to the city, issued by an insurance company acceptable to the city, in at least the limits as specified below:

Coverage	Limits of Liability
General liability:	
Bodily injury	\$300,000.00 each occurrence and aggregate
Property damage	\$300,000.00 each occurrence and aggregate
Personal injury	\$300,000.00 each occurrence and aggregate

A certificate of insurance, duly executed by the applicant's insurance carrier or carriers, must be furnished to the city, which certificate or certificates shall serve as evidence of continued existence in full force and effect of said insurance policies.

(Code 1972, § 5-119; Ord. No. 625, § 5; Ord. No. 667, § 2)

**Sec. 14-193. - Fees.**

- (a) The permit fee for plumbing permits shall be as determined from time to time by ordinance.
- (b) If the plumbing official or his duly authorized representative shall, upon his inspection after the completion of the work or apparatus, find the same does not conform to and comply with the provisions of this code, he shall notify the permit holder, indicating the corrections required; and when he shall be notified that the corrections have been made, he shall then again inspect the work or apparatus. When extra inspections are necessary due to any of the following reasons, a charge shall be made for each reinspection:
  - (1) Wrong address.
  - (2) Condemned work, resulting from faulty work.
  - (3) Repairs or corrections not made when inspection is called.
  - (4) Work not ready for inspection when called.

All reinspection fees shall be paid prior to final inspection of the plumbing work.

(Code 1972, § 5-120; Ord. No. 625, § 6; Ord. No. 749, § 1)

Sec. 14-194. - Inspections.

The water test shall be applied to the drainage system either in its entirety or in sections. If applied to the entire system, all openings in the piping shall be tightly closed, except the highest opening and the system filled with water to the point of overflow. If the system is tested in sections, each opening shall be tightly plugged except the highest openings of the section under test, and each section shall be filled with water. The water shall be kept in the system, or in portion under test, for at least 15 minutes before inspection starts; the system shall then be tight at all points.

(Code 1972, § 5-121; Ord. No. 625, § 7)

Sec. 14-195. - Plumbing contractors.

- (a) All vehicles used for business use by plumbing contractors shall have affixed to the side door or doors thereof a sign showing the name, address and state license number of the contractor in letters of a minimum size of two inches.
- (b) All plumbing contractors shall maintain in full force and effect general liability insurance, in a form acceptable and approved by the city inspector. All insurance shall be by an insurance company and in at least the amounts specified below:

General Liability Insurance in the amount of \$300,000

Coverages	Limits of Liability
Bodily Injury	\$100,000 each occurrence and aggregate
Property Damage	\$100,000 each occurrence and aggregate
Personal Injury	\$100,000 each occurrence and aggregate

The certificate of insurance, duly executed by the plumbing contractor's insurance carrier or carriers, must be furnished to the city, which said certificate shall serve as evidence of the continued existence in full force and effect of said insurance policies. Notice of cancellation of such policy shall be given to the city not less than 30 days prior to the cancellation date.

(Code 1972, § 5-122; Ord. No. 911, § 5-122, 5-13-2002)

Sec. 14-196. - Connection to sewer.

- (a) Connection with city sewer system generally. Every building in which plumbing fixtures are installed shall have a connection to a public sewer. When there is no sewer available within a reasonable distance, an approved private sewage disposal system may be used. The drainage system of each new building and of new work installed in existing buildings shall be separate and independent from that of any other building and when available shall have an independent connection with a public sewer. When one building stands in the rear of another building, on an interior lot and these buildings are on one parcel of land under one owner, then the building sewer may be extended to serve the rear.
- (b) Owner must connect to sewer. Every owner or occupant of any building or dwelling within the city where such building or dwelling shall contain a water closet or privy and which building or dwelling is within 500 feet of a public sewer shall be connected with such public sewer within 120 days after notice of sewer availability by the city. Sewer service charges will commence automatically after 120 days. In all cases where a privy or water closet is now or may hereafter be connected

with the public sewer system, the owner controlling the same or his agent shall cause such privy or closets to be supplied with water for flushing which shall be delivered from a tank or flush valve; and said tank shall be approved by the International Plumbing Code.

(Code 1972, § 5-123; Ord. No. 625, § 9; Ord. No. 715)

Sec. 14-197. - Water distribution pipe, tubing and fittings.

These provisions in the IPC shall be amended to delete Type "M" copper and substitute Type "K" or "L" copper. Also, galvanized steel pipe for use as inaccessible water distribution piping under slabs shall not be permitted

(Ord. No. 902, § 5-124, 2-12-2001)

Sec. 14-198. - Grease traps.

Minimum requirements for grease traps are as follows:

- (1) All restaurants seating up to 110 people and all washateria operations with up to 21 machines must have a minimum of one 500-gallon grease trap.
- (2) All restaurants seating 111 and over and all washateria operations which have more than 21 machines must have two 500-gallon grease traps or one 1,000-gallon grease trap.

Specifications for grease traps are on file in the plumbing inspector's office.

(Code 1972, § 5-125; Ord. No. 625, § 11)

Sec. 14-199. - Fixture units.

Fixture units as addressed within the IPC shall be amended to require that all structures with six units or more must have the main line located outside the building and may have no more than 100 fixture units on a four-inch line.

(Ord. No. 902, § 5-125.1, 2-12-2001)

Sec. 14-200. - Insulation of water lines.

All water lines exposed on the outside of buildings, all water lines in uninsulated exterior walls, and all water lines from an exterior wall to a distance of four feet inside the attic shall be insulated with a material approved by the International Plumbing Code.

(Code 1972, § 5-125.2; Ord. No. 625, § 13; Ord. No. 749, § 2)

Sec. 14-201. - Shutoff valves.

Location of shutoff valves within the IPC shall be amended by adding a requirement that multifamily dwellings shall be required to provide an accessible shutoff valve at each building.

(Ord. No. 902, § 5-125.3, 2-12-2001)

Sec. 14-202. - Backflow control.

(a) Purpose.

- (1) To protect the potable water supply of the City of La Marque, Texas, from the possibility of contamination or pollution by requiring compliance with Texas Water Commission, state and local plumbing codes, health regulations, OSHA and other applicable industry standards for water system safety within the consumer's internal distribution system(s).

Compliance with these minimum safety codes will be considered reasonable vigilance for prevention of contaminants or pollutants which could backflow into the public drinking water systems;

- (2) To promote reasonable elimination or control of cross connections in the plumbing fixtures and industrial piping system(s) of the consumer, as required by TWC, state and local plumbing codes, health regulations, OSHA, and other applicable industry standards to assure water system safety; and
- (3) To provide for the administration of a continuing program of backflow prevention which will systematically and effectively prevent the contamination or pollution of all water systems.

(b) Definitions. The following words, terms and phrases, when used in this section, shall have the meanings ascribed to them in this subsection, except where the context clearly indicates a different meaning:

**Approved backflow assembly.** A device accepted by the state department of health (TWC) as meeting an applicable specification suitable for the proposed use.

**Auxiliary water supply.** Any water supply on or available to the premises other than the purveyor's. Potable water supply auxiliary water may include water from another purveyor's public potable water supply or any natural source(s) such as well, spring, river, stream, harbors, etc., or "used waters" or "industrial fluids" or water of an unknown quality. These waters may be contaminated or polluted or they may be objectionable and constitute an unacceptable water source over which the water purveyor does not have authority for sanitary control.

**Backflow.** The reversal of the normal flow of water caused by either backpressure or backsiphonage.

**Backflow prevention assembly.** An assembly or means designed to prevent backflow. Specifications for backflow prevention assemblies are contained within the Local Plumbing Code, Texas Water Commission, Department of Health and Water Hygiene, AWWA Standard C506, AWWA Manual M15 and the Backflow Prevention Program as approved by the state.

**Backpressure.** The flow of water or other liquids, mixtures, or substances under pressure into the feeding distribution pipes of potable water supply system from any source(s) other than the intended source.

**Backsiphonage.** The flow of water or other liquids, mixtures, or substances into the distribution pipes of a potable water supply system from any source(s) other than the intended source caused by the reduction of pressure in the potable water supply system.

**Contamination.** Means a degradation of the quality of the potable water supply by substances of an unknown quality, or by sewage, industrial fluids, waste liquids or compounds.

**Cross connection.** Any physical connection or arrangement of piping or fixtures which may allow nonpotable water, water of unknown quality, industrial fluids or other material of questionable quality to come in contact with the potable water inside a distribution system. This would include any temporary connections, such as swing connections, removable sections, four-way plug valves, spools, dummy sections of pipe, swivel or change-over devices or sliding multiport tubes or other plumbing arrangements.

**Cross connection—Containment.** The installation of an approved backflow assembly at the water service connection to any customer's premises for protection to the public potable water system. The installation of an approved backflow assembly within the customer's water system for the protection of employees (both may be required) or, it shall mean the installation of an approved backflow prevention assembly on the service line leading to and supplying a portion of a customer's water system where there are actual or potential cross connections which cannot be effectively eliminated or controlled at the point of cross connection (isolation).

**Cross connection—Controlled.** A connection between a potable water system and a nonpotable water system with an approved backflow prevention assembly properly installed and maintained so that it will continuously afford the protection commensurate with the degree of hazard.

**Water purveyor.** The rules and regulations for public water systems and the Texas State Department of Health and Water Hygiene (TWC) defines "purveyor" as a water supplied to 15 taps or to 25 people in any one working day.

(c) Director of utilities' responsibilities.

- (1) The director of utilities shall be responsible for the protection of the city's potable water distribution system from foreseeable conditions leading to possible contamination or pollution of the potable water system due to the backflow of contaminants or pollutants into the potable water supply (upstream of consumer's meter).
- (2) Potable water system surveys/inspections of the consumer's water distribution system(s) shall be conducted or caused to be conducted by licensed individuals deemed qualified by and representing city. Survey records shall

indicate compliance with the aforementioned health and safety standards. All such records will be maintained by the inspection department.

- (3) The city shall notify, in writing, all consumers of the need for the annual system survey to ensure compliance with existing applicable minimum health and safety standards.
  - (4) Selection of an approved backflow prevention assembly for containment control required at the service entrance shall be determined from the results of the system survey.
- (d) Consumer's responsibility:
- (1) To comply with this section as a term and condition of supply and consumer's acceptance of service is admittance of his/her awareness.
  - (2) It shall be the responsibility of the consumer to purchase, install, test, and maintain any backflow prevention device/assembly required to comply with this section. These records are to be maintained for three years.
- (e) Plumbing official's responsibilities:
- (1) The plumbing official's responsibility is to enforce the applicable sections of the plumbing code beginning at the point of service (downstream of consumer side of the meter) and continuing throughout the developed length of the consumer's water system.
  - (2) Water vacating the drinking water supply (meter) must do so via approved air gap or approved mechanical backflow prevention assembly, properly installed in accordance with this section.
- (f) Certified backflow assembly technicians, purveyors or repairperson's responsibility:
- (1) Whether employed by the consumer or the city to survey, test, repair or maintain backflow prevention assemblies, the certified backflow technician, purveyor or repairperson shall be licensed by the state for backflow prevention and will have the following responsibilities:
    - a. Use acceptable testing equipment and procedures for testing, repairing, or overhauling backflow prevention assemblies.
    - b. Make reports of such testing and/or repair to the consumer, purveyors, Health Department and Texas Water Commission which shall include the list of materials required.
    - c. Use replacement parts which are equal in quality to parts originally supplied by the manufacturer of the assembly being repaired.
    - d. Avoid changing the design, material or operational characteristics of the assembly during testing, repair or maintenance.
    - e. A certified technician, licensed by the state, shall perform all tests of the mechanical devices/assemblies and be responsible for the competence and accuracy of all tests and reports.
    - f. Be equipped with, and be competent to use, all necessary tools, gauges, and other equipment necessary to properly test and maintain backflow prevention assemblies.
    - g. The certified technician conducting the test must tag each backflow prevention assembly showing the serial number, date tested and by whom.
  - (2) In case of a consumer requiring a commercially available technician, any certified technician licensed by the state is authorized to make the test and report the results of that test to the consumer, water purveyor and the Texas Water Commission. If such a commercially tested assembly is in need for repair, a licensed journeyman or tradesperson licensed by the state in backflow prevention and recognized by the authority having jurisdiction shall make the actual repair.
- (g) Policy.
- (1) No water service connection to any premises shall be installed or maintained by the public water purveyor unless the water supply is protected as required by state, federal, and local laws, regulations, codes, as contained in this section. Service of water to a consumer found to be in violation of this section shall be discontinued by the water purveyor after due process of written notification of violation and appropriate time sequence for voluntary compliance if:
    - a. A backflow prevention assembly required by this section for control of backflow, backsiphonage and cross connection is not installed, tested, and maintained;

- b. If it is found that a backflow prevention assembly has been removed or bypassed;
  - c. If an unprotected or possible cross connection exists on the premises; or
  - d. If the periodic system survey has not been conducted. Service will not be restored until such conditions or defects are corrected.
- (2) The customer's system(s) shall be open for inspection at all reasonable times to authorized representatives of the city to determine whether cross connections or other structural or sanitary hazards, including violation of this section exist and to audit the results of the required survey.
  - (3) Whenever the city deems a service connection's water usage contributes a potential hazard to the water supply, an approved backflow prevention assembly shall be installed on the service line of the identified consumer's water system, at or near the property line or immediately inside the building being served; but in all cases before the first branch line leading off the service line.
  - (4) The type of protective assembly required under subsection (g)(3), shall depend upon the degree of hazard or potential hazard which exists at the point of cross connection (whether direct or indirect), applicable to local and state requirements or resulting from the required survey.
  - (5) All presently installed backflow prevention assemblies which do not meet the requirements of this section but were approved assemblies for the purposes described herein at the time of installation and which have been properly maintained, shall, except for the inspection and maintenance requirements under subsection (g)(6), be excluded from the requirements of these rules so long as the city is assured that they will satisfactorily protect the public water system. Whenever the existing assembly is moved from the present location or requires more than the minimum maintenance or when the city finds that the operation or maintenance of this assembly constitutes a hazard to health, the unit shall be replaced by an approved backflow prevention assembly meeting the local and state requirements.
  - (6) It shall be the responsibility of the consumer at any premises where backflow prevention assemblies are installed to have certified surveys/inspections and operational tests made at least once per year. These records must be kept three years, with copies sent to the city at the consumer's expense. In those instances where the city deems the hazard to be great, they may require certified surveys/inspections and tests at a more frequent interval. It shall be the duty of the city to see that these tests are made according to the standards set forth by the regulating agencies.
  - (7) All backflow prevention assemblies shall be tested upon initial installation and once every 365 days thereafter. Records will be kept on file for three years.
  - (8) If violations of this section exist or if there has not been any corrective action taken by the consumer within ten days of the written notification of deficiencies noted within the survey, then the city shall deny or immediately discontinue service to the premises by providing a physical break in the service line until the customer has corrected the condition(s) in conformance with the state and city status relating to plumbing, safe drinking water supplies and the regulations adopted pursuant thereto. If it is determined by the director of utilities that an immediate danger to the quality of the city's potable water system exists, services shall be terminated immediately.
  - (9) All backflow prevention devices shall be installed aboveground with a minimum of clearance of 18 inches to ground and one foot clearance on all sides to facilitate inspection, testing and repair. Assemblies must be protected from inclement weather. No meter vaults or below-grade installations are permitted.

(Code 1972, § 5-125.4; Ord. No. 764, § 1)

Secs. 14-203—14-227. - Reserved.

ARTICLE V. - GAS CODE

Sec. 14-228. - Adoption of code.

The International Fuel Gas Code (2003), and all future amendments, on file in the office of the city building inspector, is hereby adopted as the gas code for the City of La Marque. All installations of gas piping shall be installed and regulated in accordance with such gas code, except that such code shall have a sentence added to read: "When wrought steel and wrought

Iron pipe are used outside of buildings, they shall be epoxy-coated and wrapped at the joints according to local gas company specifications."

(Code 1972, § 5-126; Ord. No. 418, § 1; Ord. No. 627)

Secs. 14-229—14-249. - Reserved.

#### ARTICLE VI. - MECHANICAL CODE

Sec. 14-250. - Adoption of code.

The International Mechanical Code, current edition and all future amendments, on file in the office of the city building inspector, is hereby adopted as the mechanical code for the City of La Marque.

(Code 1972, § 5-136; Ord. No. 418, § 1; Ord. No. 626)

Secs. 14-251—14-278. - Reserved.

#### ARTICLE VII. - SUBSTANDARD BUILDINGS OR STRUCTURES

##### DIVISION 1. - BUILDING STANDARDS COMMISSION

Sec. 14-279. - "Substandard buildings or structures" constituted and defined.

All buildings, or structures, which have any or all of the following defects or lack of facilities shall be deemed substandard buildings:

- (1) All buildings or structures which do not have the number of water closets, urinals and lavatories required by the plumbing ordinance of the City of La Marque, or which are not connected to the city sewer when required by law, or where inadequate septic tanks are maintained, or which are used or designed to be used as dwellings or dwelling units which do not provide the following fixtures connected to an approved source of disposal: One flush water closet; one shower bath or bathtub; one sink per dwelling unit and one lavatory.
- (2) All buildings or structures that have become deteriorated through accident or lack of repair or natural causes, or by damage through exposure to the elements, especially winds, hail or rain, or damage through fire, to the extent that the roof, windows and door, or portions of the house, building or structure which protect from the weather will no longer reasonably protect from the weather.
- (3) All buildings or structures which constitute or in which are maintained fire hazards as that term is defined in the Standard Building Code, as adopted by the City of La Marque, Texas.
- (4) All buildings or structures which are so structurally deteriorated that they are in danger of collapse, or which cannot be expected to withstand the reasonably anticipated storms or hurricanes.
- (5) All buildings or structures not wired in conformity with the electrical code of the city as the same now exists, or as hereafter amended.
- (6) All buildings or structures not constructed in conformity with the city building code as the same now exists, or as hereafter amended.
- (7) All buildings or structures so constructed or permitted to be so constructed as to constitute a menace to health or safety including all conditions conducive to the harboring of rats and mice or other disease-carrying animals or insects reasonably calculated to spread disease, and including such conditions to safety as inadequate bracing or the use of deteriorated materials.



- (8) Any buildings or structures coming within the definition of an unsafe building, as set out in the building code as adopted by the city.

(Code 1972, § 5-151; Ord. No. 449, § 1)

Sec. 14-280. - Adoption of subchapter C of chapter 54 of the Local Government Code of the State of Texas and providing for the implementation of said chapter within the city limits.

The City of La Marque adopts the provisions of chapter 54 of the Local Government Code of the State of Texas and subchapter C thereof, which is entitled "Quasi-Judicial Enforcement of Health and Safety Ordinances of Home-Rule Municipality," and does declare the implementation of that subchapter and the creation of the building and standards commission which shall be composed of five members and a number of alternate members not to exceed eight. In addition, the commission shall have such powers, duties and responsibilities as shall be from time to time provided for and delegated to the City of La Marque by the Legislature of the State of Texas, it being the intent of the City of La Marque to fully implement subchapter C of chapter 54 of the Local Government Code as well as any other commission, officer or legal authority as provided for under the provisions of state law such powers, privileges and rights as may be from time to time provided for by the Legislature of the State of Texas without restriction of limitation.

(Code 1972, § 5-152; Ord. No. 449, § 2; Ord. No. 768, § 1)

State Law reference— Quasi-judicial enforcement of health and safety ordinances, V.T.C.A., Local Government Code § 54.031 et seq.

Sec. 14-281. - Additional authority of the building and standards commission.

The building and standards commission as created and provided for under the provisions of state law shall, in addition to the statutory duties and responsibilities, have such additional duties and responsibilities as shall be from time to time delegated to it by the city council of the City of La Marque, and shall, in addition, determine such issues and render decisions in accordance therewith as may be from time to time required of an appellate body, regardless of the name or designation provided in the various codes adopted by the city council of the City of La Marque as a part of this Code and shall render decisions in accordance with the limitations, restrictions and provisions as provided for in this Code. In such cases, a simple majority of the members of the building and standards commission shall be sufficient to take action, unless by other law or ordinance a greater majority shall be required.

(Code 1972, § 5-153; Ord. No. 449, § 3; Ord. No. 459; Ord. No. 768, § 2)

State Law reference— Building and standards commission, V.T.C.A., Local Government Code § 54.033.

Sec. 14-282. - Building official to present cases.

The building official is hereby designated to present all cases to the commission pursuant to the provisions of chapter 54 of the Local Government Code of the State of Texas and subchapter C thereof relating to the Quasi-Judicial Enforcement of Health and Safety Ordinances of Home-Rule Municipality. In addition, the building official shall present testimony to the commission in support of any allegations of substandard character of buildings and structures. The building official, in performance of the duties of said office, shall give notices and shall take such actions as shall be from time to time provided for and directed by the Legislature of the State of Texas, as currently set out in the provisions of chapter 54 of the Local Government Code and subchapter C thereof, as well as any amendments and changes which shall be from time to time made.

(Code 1972, § 5-154; Ord. No. 449, § 4; Ord. No. 768, § 3)

Sec. 14-283. - Emergency procedure.

- (a) When it shall appear that a building or structure in the city is a substandard building under the terms of this article and that such building or structure or the manner of its use constitutes an immediate and serious danger to life or property, the condition shall be deemed a condition justifying the use of emergency measures. In such case, the building standards

commission, a majority of the commissioners or the building official may, with the consent and approval of the city manager, order the following emergency measures to be taken:

- (1) Immediate vacation of such building, structure and/or adjoining buildings or structures;
- (2) Vacation of the danger area around such building or structure;
- (3) Such emergency shoring-up and bracing of walls, roofs and supports as are required to render such building or structure safe;
- (4) Destruction of such walls, roofs and supports or the entire structure or so much thereof as cannot be braced or made secure with safety; and
- (5) Posting of notices on or near such building or structure or buildings or structures, notifying the public of such order and ordering all persons to keep out of such building, buildings, structure or structures and the areas of danger surrounding it or them.

(b) When any of the above-mentioned measures are ordered to be taken, notice of such order shall be given as follows:

- (1) Such order shall be directed to the owner of such substandard building or structure or his authorized representative, if the same be known. Where notification can be accomplished without increasing the danger to life or property, notice shall be given by personal service on the owner of the building or structure or his said representative; and
- (2) In the event that such notification would create such a delay as would materially increase the danger to life or property, then such notice need not be given.

(c) If the owner or his representative shall fail or refuse to carry out such order or shall fail to carry out such order satisfactorily, the building standards commission or the building official may, upon approval of the city manager, proceed to carry out such orders either by private contract or through an agency of the city, and the cost thus incurred shall constitute a valid lien against the property.

(Code 1972, § 5-155; Ord. No. 449, § 5; Ord. No. 768, § 4)

Sec. 14-284. - Failure to obey order of building standards commission; correction of condition by city; lien for charges.

- (a) Should the orders of the building standards commission not be followed or carried out within the time limitations stated in the order, the city may do whatever is necessary to make the necessary repairs or otherwise remove or remedy the condition, or cause the same to be done, and charge the expenses incurred thereby to the owner of such property or premises and such expenses shall be assessed against the real estate upon which the work was done. The doing of such work and the charging and assessing of the expenses thereof against the owner shall not relieve the owner or occupant of any such premises from prosecution for violation of this article. The city manager shall file a statement of expenses incurred in repairing, removing or otherwise remedying the condition as previously set forth in the order of the building standards commission, giving the amount of such expense and the date on which the work was done or the improvements made, with the county clerk of Galveston County, Texas, and the city shall have a privilege lien on such lot or real estate upon which the work was done or the improvements made to secure the expenditures so made which lien shall be second only to the tax liens and liens for street improvements. The amount of such expenses shall bear ten per cent interest from the date such statement is filed. For any such expenditures and interest, suit may be instituted and recovery and foreclosure of such lien may be had in the name of the city, and the statement of expenses so made, or a certified copy thereof, shall be prima facie proof of the amount expended for such work or improvements.
- (b) Neither the City of La Marque nor any authorized agent acting under the terms of this article shall be liable or have any liability by reason of orders issued or work done in compliance with the terms of this article.

(Code 1972, § 5-156; Ord. No. 449, § 6)

Sec. 14-285. - Duty of city attorney to enforce orders.

It shall be the duty of the city attorney of the City of La Marque to enforce the orders of the building standards commission or the city council, upon appeal, by filing action in the appropriate court of this state.

(Code 1972, § 5-157; Ord. No. 449, § 7)

Sec. 14-286. - Refusal, failure to leave building ordered vacated; entering posted dangerous building; interfering with, hindering vacation, repair or demolition of building.

Any person who shall willfully refuse or fail to leave a building which has been ordered vacated under the terms of this article, or who shall enter a building that has been declared to be dangerous and notice of which declaration shall have been posted, and/or any person who shall interfere with or hinder the vacation, repair, or demolition of any building under the terms of this article, shall be deemed guilty of a misdemeanor and shall be subject to a fine in accordance with the general penalty provisions of the city Code of Ordinances, and each and every day's violation shall constitute a separate and distinct offense. In case the owner or occupant of any substandard building ordered vacated, repaired or demolished under the terms of this article shall be a corporation, and shall violate any provisions of this article, the president, vice-president, secretary, treasurer of such corporation, or any manager, agent or employee of such corporation shall be also severally liable for the penalties therein provided.

(Code 1972, § 5-158; Ord. No. 449, § 8)

Secs. 14-287—14-305. - Reserved.

#### ARTICLE X. - OFF-STREET PARKING SPACES

Sec. 14-389. - New buildings or structures.

After the effective date of this article, no building or structure shall be initially constructed and subsequently occupied unless such building or structure is designed to have off-street vehicular parking spaces meeting the specifications as set forth in sections 14-390, 14-391 and 14-392 of this article.

(Code 1972, § 5-206; Ord. No. 604, § 1)

Sec. 14-390. - Physical specifications.

Off-street vehicular parking spaces and driveways shall meet the following physical specifications:

- (1) Parking spaces should generally not be less than nine feet wide and 20 feet in length and driveways shall be a minimum of nine feet wide for a single-family unit and 12 feet for multifamily, commercial and other uses.
- (2) Drive way entrances and exits beginning at the edge of existing road pavement and extending the length of the driveway, as well as all parking areas, must be paved surfaces. Paved surfaces shall be defined as four-inch concrete surface with number six wire mesh or four-inch flexible base with one-inch hot mix asphalt.

(Code 1972, § 5-207; Ord. No. 604, § 2)

Sec. 14-391. - Access specifications.

Access and off-street vehicular parking spaces shall meet the following specifications:

- (1) Provide adequate circulation to through traffic in the street as determined by the building inspector, and each parking space is immediately adjacent to a driveway of adequate width, as determined by the building inspector;
- (2) Driveway width to off-street parking areas from adjoining public streets not greater in width than 30 feet, and, curb radius of not less than 15 feet for commercial use, or 2.5 feet for a single or multifamily residential use;
- (3) Approval of the building inspector for the location as provided in subsection (2) of this section;
- (4) If applicable, head-in parking shall be allowed if it presents no undue hazards to through traffic as determined by the building inspector;
- (5) Head-in parking and entrance driveways must be 30 feet from intersections pavement;

(6) Under no circumstances will parking spaces be allowed on public rights-of-way, nor within 12 feet of the pavement edge.

(Code 1972, § 5-208; Ord. No. 604, § 3)

Sec. 14-392. - Adequate number of spaces to be provided; determination by building official.

All buildings and structures constructed after the date of adoption of this article shall provide for an adequate number of off-street parking spaces to meet the needs of the structure being constructed as determined by the building inspector.

(Code 1972, § 5-209; Ord. No. 604, § 4)

Sec. 14-393. - Specifications to be included in the site plan.

After the effective date of this article, the building inspector shall not issue a building permit for the construction of any building or structure if the site plan for the building or structure does not include the specifications as given in sections 14-390, 14-391 and 14-392 of this article.

(Code 1972, § 5-210; Ord. No. 604, § 5)

Sec. 14-394. - Application of article to existing buildings or structures.

The provisions and requirements of this article shall not be applied to buildings or structures in existence or currently being constructed with a valid building permit on the effective date of this article.

(Code 1972, § 5-211; Ord. No. 604, § 6)

Sec. 14-395. - Appeals.

Any person, firm or corporation aggrieved by the terms of this article or the decision of the building inspector may appeal the requirements of the article or the decision of the building inspector to the building standards commission. The commission may find that a proposed use is unique to the proposed activity and does not reasonably establish a demand for parking as set forth in sections 14-390, 14-391 and 14-392 of this article. The building standards commission may recommend to the city council a change that is in the public interest. The city council shall have ultimate authority to approve such a change.

(Code 1972, § 5-212; Ord. No. 604, § 7)

Sec. 14-396. - Temporary parking lots.

The provisions of this article shall not be applicable to temporary parking lots, that would be in use for less than one year.

(Code 1972, § 5-213; Ord. No. 604, § 8)

Sec. 14-397. - Violation.

Any person, firm or corporation violating the provisions hereof shall, on conviction, be fined in accordance with the general penalty provisions section 1-7.

(Code 1972, § 5-214; Ord. No. 604, § 9)

Secs. 14-398—14-422. - Reserved.

ARTICLE XII. - DISPLAY OF STREET ADDRESSES ON BUILDINGS

Sec. 14-456. - Required.

The owner, occupant, or person in control of every building or structure in the city used or intended to be used for residential, business, commercial, educational, religious, governmental, or similar purpose shall cause to be placed on the premises upon which building or structure is situated, the street address number/letter for such building or structure as designated by the city clerk's office.

(Code 1972, § 5-251; Ord. No. 800, § 1)

Sec. 14-457. - Placement of numbers/letters.

Street address numbers/letters designated to be displayed pursuant to the provisions of section 14-456 above, shall be installed/placed as follows:

- (1) Single-floor buildings/structures:
  - a. On the front of the building or structure so that the numbers/letters are visible during daylight hours and during night-time hours, are visible by portable lighting or other means of lighting of the type used by emergency personnel or police.
  - b. On a post or other support, such as those used to hold mailboxes or lights, but not excluding other types of supports. If the numbers [are to] be placed on a holder parallel to the street, the numbers need to be only on the side facing the street. If the numbers [are to] be placed on a holder perpendicular to the street, the numbers must be placed on both sides so as to be visible from traffic in either direction on a public street. Identifying numbers/letters for this section must be at least three inches high. Numbers/letters larger than three inches must be painted a color significantly different from the mounting surface so that they can be seen as stipulated in subsection (1)a above.
- (2) First floor of multi-storied buildings, apartments, and/or structures: Numbers/letters must be installed in a location as described in subsection (1) above. Where the front door of an individual apartment, townhouse, or condominium, or strip shopping center, is not visible from a public street, the numbers/letters must be displayed so that they are visible from the normal means of ingress or courtyard. Numbers/letters will be installed on or near the main entry door and must be at least three inches tall; reflective type optional.
- (3) Above first floors: Each main entry will be marked with a number/letter at least three inches tall on or near the main entry door. The reflective material requirement and visibility requirements as listed elsewhere in this article are not applicable above the first floor.

(Code 1972, § 5-252; Ord. No. 800, § 2)

Sec. 14-458. - Penalty.

Any person, corporation, or landlord who shall violate any provision of this article will be notified in writing by the code enforcement official of such violation(s) and afforded 20 working days to comply. Thereafter, such party described above will be deemed guilty of a misdemeanor and, upon conviction, shall be fined in an amount not to exceed \$100.00. Each day of violation following 20 working days to comply, will constitute a separate offense whereby the person can be fined \$100.00 per day of violation. A reasonable grace period will also apply when noncompliance can be directly attributed to vandalism, accidental damage, theft, or normal painting or repair.

(Code 1972, § 5-253; Ord. No. 800, § 3)

Secs. 14-459—14-470. - Reserved.

## **Review of Codes and Standards**

### **1.00 General**

This code review was conducted at a high level for purposes of verifying layouts and assumptions about renovations to the existing structure, to support the feasibility study.

A basic assumption was made that no fire wall will be required to separate the existing building from the expansion. Requirements of the code apply to the combined building. This assumption caused no violations in the review.

### **1.01 Applicable Codes**

- Life Safety: International Building Code, 2003 Ed. (IBC)
- Fire: None adopted
- MEP:
  - International Mechanical Code, current edition (IMC)
  - National Electric Code, current edition (NEC)
  - International Plumbing Code, 2003 Ed. (IPC)
  - International Fuel Gas Code, 2003 Ed. (IFGC)
- Energy: None adopted
- Parking:
  - La Marque, Texas Code of Ordinances (LCO) Chapter 14, Article X
  - La Marque, Texas Code of Ordinances (LCO) Chapter 71, Section 71-22
- Accessibility: Texas Accessibility Standards, 2012 Ed.

### **1.02 Other Applicable Regulations**

- Zoning: La Marque, Texas Code of Ordinances (LCO) Chapter 71

### **1.03 Regulating Authorities**

Inspection Department, La Marque, Texas

## 2.00 Zoning

Currently C-1 General Commercial	La Marque Zoning Map
Adjoining lot: R-1 Single Family	La Marque Zoning Map
Public service use is allowable.	LCO 71-13 (c) (10)
District regulations:	LCO Table 71-20 and Note A
Max. height: 50 feet	
Min. side yard: 5 feet	
Min. rear yard: 10 feet	
Min. front yard: 20 feet	
Min. lot area: match adjoining residential: 6,000 sqft	
Min. building size: 0	
Masonry and roofing: match adjoining residential:	
masonry on full facades facing streets	
No metal roofing permitted	
Min. lot width: match adjoining residential: 60 feet	
Min. lot depth: match adjoining residential: 120 feet	

## 3.00 Occupancy Classification

Group B      IBC Chapter 3

### 3.01 Occupancy Separations

No separation required between accessory (not more than 10% of area of the floor in which they are located) and main occupancy.      IBC 302.2

Code Review will be based on single occupancy.

## 4.00 Construction Type

Refer to Table 503 and Section 506.

Occupancy Classification	Construction Type	Allowable Area	Maximum Stories/Height
B	IIB	23,000 sqft	4 / 55 feet

**Galveston Medical Examiner Feasibility Study**  
**BUILDING CODE ANALYSIS**  
30 November 2015

**5.01 Building Height and Area:**

Height: 1 story, 17 feet

Area:

Level	GSF	USF
Level 1	13,564	

**5.02 Allowable Area Increase**

W value (weighted average width): 30	506.2.1
Frontage Increase $I_f$ : 75	506.2
Sprinkler Increase $I_s$ : 0	506.3
Allowable Area $A_a$ : 40,250 sqft	506

**6.00 Fire Resistance Requirements**

**6.01 Fire-Resistance Ratings for Building Elements**

All elements 0 hours, no improvements required. Table 601

**6.02 Fire-Resistance Ratings for Exterior Walls based on Fire Separation Distance.**

(not reviewed)

**6.03 Atriums**

N/A

**6.04 Fire-Resistance Ratings**

(not reviewed)



## 6.05 Maximum Area of Exterior Wall Openings

Table 704.8 Openings:

Fire separation distance	Degree of protection	Allowable area
>30	Unprotected	No limit

From satellite image, distance between structure and adjacent residence is approximately 50 feet.

Assuming the residence's openings are about 25% unprotected, an imaginary property line may be placed 15 feet from it. Then the building's wall is about 35 feet from the imaginary line.

Unlimited openings are allowed on open sides of a ground level 704.8.2

## 6.06 Finishes

(not reviewed)

## 7.0 Fire Protection Systems

### 7.01 Automatic Sprinkler Systems - not provided

### 7.02 Portable Fire Extinguishers

(not reviewed)

## 8.0 Egress

### 8.01 Occupant Load and Egress Width

Refer to Table 1004.1.2 and Section 1005.

Occupant Load Calculations: (Multi-Purpose and Event Gallery assumed to be capable of use as Standing Space assembly):

**Galveston Medical Examiner Feasibility Study**  
**BUILDING CODE ANALYSIS**  
 30 November 2015

Function	Loc. (level)	Occ. Load Factor (Table 1004.1.2)	Area Provided (sqft)	Occupant Load
Business Areas (lab and office)		100 gross	60 to 1,749	1 to 18
Storage and Utility Areas		300 gross	60 to 65	1
<b>TOTAL FLOOR</b>			<b>13,564</b>	<b>136</b>

Stairway min. width without automatic sprinkler system: 0.3 inches per occupant (Table 1005.1)

Other egress components min. width w/o sprinkler: 0.2 inches per occupant (Table 1005.1)

Level	Total Occupant Load per Floor	Min. Stairway Width			Min. Door Width		
		Calculated (Table 1005.1)	Absolute (1016.2)	Provided	Calculated (Table 1005.1)	Absolute (1009.1)	Provided
Ground Level	136	40.8"	44"	50"	27.2"	44"	144"

**8.02 Maximum Travel Distance**

Refer to Table 1015.1:

Occupancy Group	Maximum Travel Distance	
	Unsprinklered Building	Sprinklered Building
B	200	300

**8.03 1013.3: Common Path of Egress Travel**

Occupancy Group	Common path of egress travel distance
B	75' typically (unsprinklered)

	100' in locations with occupant loads below 30 (1013.3 Exc. 2)
--	---

**8.04 Section 1016.3: Dead End Corridor**

Occupancy Group	Max. dead end corridor length	Notes
B	20'	unsprinklered

**8.05 Arrangement of Exits**

Refer to 1014.2.1.

Without a fire sprinkler system, the separation distance of the exit doors or exit access doorways shall not be less than one-half of the length of the maximum overall diagonal dimension of the area served.

**8.06 Minimum Number of Exits for Occupant Load**

Refer to Table 1018.1

Occupancy Load (person per story)	Minimum Number of Exits
1-500	2

**8.07 Stairway Enclosure**

N/A

**8.08 Egress fire ratings**

Generally, w/o sprinkler, 1 hour for corridor Table 1016.1  
 Serving more than 30 occupants, no rating  
 If 30 or less.

**Galveston Medical Examiner Feasibility Study**  
**BUILDING CODE ANALYSIS**  
 30 November 2015

**9.00 Required Plumbing Fixtures**

**Table 2902.1**

Classification	Occ. Group	Description	WC		Lavatories		**Drinking fountains	Other
			Male	Female	Male	Female		
Business	B		1 per 25 first 50 + 1 per 50		1 per 40 first 50 + 1 per 80		1 per 100	1 service sink

Calculated with occupant load of 136:

WC: 4

Lavatory: 4

DF: 2

Other: 1 service sink

Employees shall be provided with toilet facilities in all occupancies  
 2902.4

**10.00 Parking Requirements**

**Parking Ordinance:**

Minimum space dimensions 9'x20' LCO 14-390 (1)  
 Minimum drive width 12' LCO 14-390 (2)

Required number of spaces LCO 71-22

Closest match: Offices and banks  
 3.3 spaces per 1,000 sqft GFA =  
 45 spaces

Required employee parking may be located within 1000 feet of premises  
 LCO 71-22 note 6

Board may reduce the requirement if the required number is an unnecessary hardship due to the nature of the proposed use. LCO 71-22 note 13

**Provided spaces:**

29, counting only parking areas immediately adjacent to building  
 47, counting the entire south parking area shared with adjacent building  
 Street parking with 1000 feet of property lines

**TAS Accessible Parking Spaces**

Note: this calculation is based on entire parking lots

Min. accessible spaces: TAS Table 208.2

2 in south lot: 1 for each building

1 in west lot

Min. van parking spaces: 1 TAS 208.2.4

**11.00 Energy Code**

Not reviewed

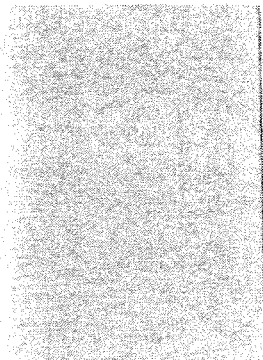
**12.00 Accessibility**

A cursory check to the current level of completion of the drawings found no definite violations.

Lack of a ramp at the gurney entry is acceptable given it is an employee work area per TAS 203.9, and the physical improbability of a wheelchair using employee handling gurneys.

Restrooms may need to have larger footprints to accommodate accessible stalls, but the double wall to the east of them is not showing a use and may be able to shrink accordingly.

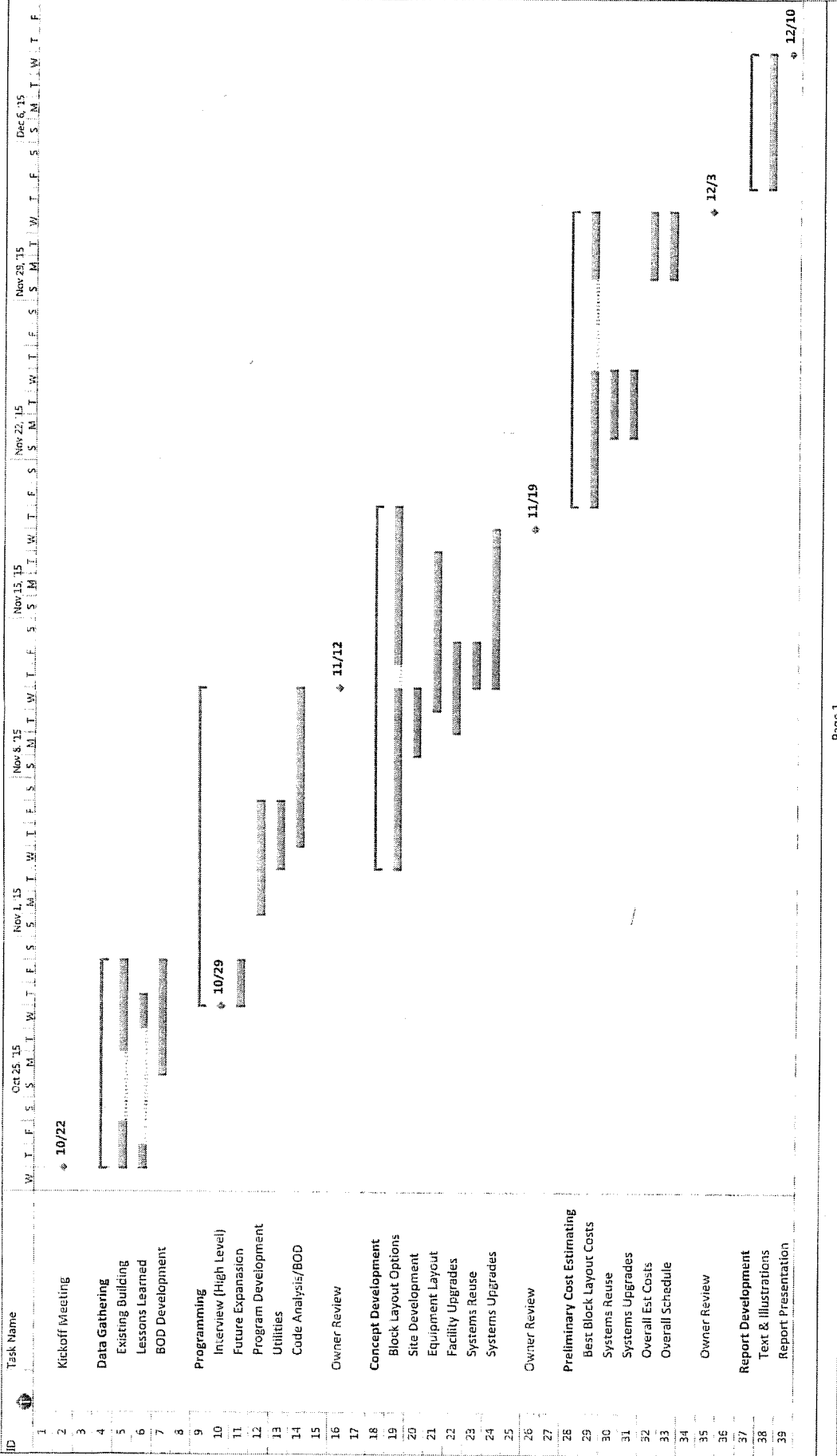
01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100



Design Criteria  
Applicable Codes  
**Study Schedule**  
Program/Space Needs Lists  
Optional Layout Studies  
Selected Layout Study  
MEP Narrative  
Construction Cost Estimate  
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**GALVESTON COUNTY  
MEDICAL EXAMINER'S OFFICE**

**PRELIMINARY DESIGN SCHEDULE  
HOK OCTOBER 22, 2015**





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**GALVESTON COUNTY ME STAFF AND VISITORS:**

**DAILY:**

20 people

- Doctors (including fellow), 6
- Front office staff, 5
- Technicians, 5
- Photographer, 1
- Investigator, 1
- Resident and/or student, 2

**ONCE OR TWICE PER WEEK:**

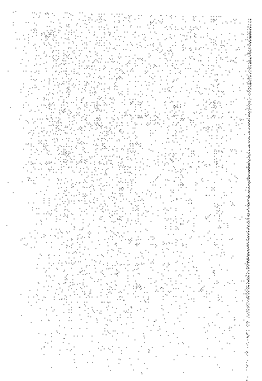
30 people

- Regular daily staff +
- Additional investigators
- Law enforcement personnel
- District attorney staff
- Family members of decedents

**ONCE OR TWICE PER MONTH:**

50 people

- Regular staff +
- Groups visiting for tours and/or lectures



## STORAGE REQUIREMENTS:

Several space requirements are given in cubic feet as ceiling heights in our current building vary widely. In addition, much of our material does not need to be accessed on a daily basis and may be stored on a high shelf without much inconvenience.

"Dirty" and "clean" spaces are differentiated below but may be combined respectively if needed. "Dirty" spaces contain biohazardous material and have the potential to smell unpleasant. They should be separated from office staff physically and have separate air-handling/ventilation.

\* NOTE: These dimensions in cubic and linear feet reflect the volume of material requiring storage. They do not take into account floor space, aisle space, etc.

**WET TISSUE (tissue specimens preserved in formaldehyde/"dirty"): 1,500 cubic feet\***

**FREEZER (room for 2-3 bodies and frozen body fluids and tissues/"dirty"): 1,100 cubic feet**

**MORGUE SUPPLIES ("clean" but should be contiguous with or adjacent to morgue): 450 cubic feet\***

**EVIDENCE ("dirty"): 300 cubic feet\***

**DNA ("dirty"): 300 cubic feet\***

**DRYING ROOM (Blood-soaked clothing needs to hang dry before it is packaged into evidence bags/"dirty"): picture a closet with hanging rods and a morgue-type floor that can be rinsed into a drain; 50 square feet should be sufficient assuming closet rods are on 3 sides of the room.**

**HISTOLOGY (paraffin tissue blocks and glass slides/ "clean" or "dirty"): 200 cubic feet\***

**CLEANING/UTILITY (janitorial supplies/ "clean"): 50 square feet**

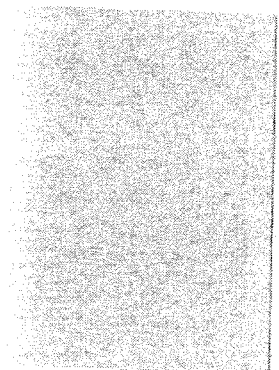
**WASHER AND DRYER ("clean"): will require hook-ups**

**FILES (Should be convenient to office staff/"clean"): approximately 240 linear feet\* of standard (11<sup>3/4</sup> inch wide x 8<sup>5/8</sup> inch tall) paper files**

**OFFICE SUPPLIES (Should be convenient to office staff/"clean"): 50 square feet**

## CHEMICAL INVENTORY GALVESTON COUNTY MEDICAL EXAMINER OFFICE 2015

DIVISION	CHEMICAL NAME	LOCATION	CONTACT/PHONE	IRRITANT	FLAMMABLE	CORROSIVE	TOXIC	CARCINOGEN	UPDATED ON	CHEMICAL	
										EXPIRED	MSDS
GCMEO	BLEACH - SODIUM HYPOCHLORITE <i>10 9.11 10's</i>	STORE ROOM	SHANE/935-9274 X 113	YES					8/28/2015	4/1/2016	YES 10 6's
GCMEO	CAVICIDE DISINFECTANT <i>2 9.11 10's</i>	AUTOPSY SUITE	SHANE/935-9274 X 113	YES	YES				8/28/2015	4/1/2016	YES 2 6's
GCMEO	CLOROX DISINFECTANT WIPES <i>10 9.11 10's</i>	STORE ROOM	SHANE/935-9274 X 113						8/28/2015	2/1/2006	YES 10 10's counting
GCMEO	DECALCIFIER FIXITIVE <i>10 9.11 10's</i>	AUTOPSY SUITE	SHANE/935-9274X113		YES	YES	YES		8/28/2015		YES 1 6's
GCMEO	FORMALDEHYDE 10% <i>10 9.11 10's</i>	AUTOPSY SUITE	SHANE/935-9274 X 113		YES	YES	YES		8/28/2015	8/1/2017	YES 25 6's
GCMEO	FORMALDEHYDE 20% <i>10 9.11 10's</i>	AUTOPSY SUITE	SHANE/935-9274 X 113		YES	YES	YES		8/28/2015	6/1/2016	YES 10 6's
GCMEO	HYDROGEN PEROXIDE 3% <i>10 9.11 10's</i>	STORE ROOM	SHANE/935-9274 X 113						8/28/2015	8/1/2017	YES 1 6's
GCMEO	LYSOL DISINFECTANT SPRAY <i>10 9.11 10's</i>	STORE ROOM	SHANE/935-9274 X 113						8/28/2015	8/1/2016	YES 10 10's counting
GCMEO	NEUTROLENE DEODORIZER SPRAY <i>10 9.11 10's</i>	STORE ROOM	SHANE/935-9274 X 113						8/28/2015	NO EXPIRATION	YES 3 10's counting
GCMEO	PALMOLIVE SOAP <i>10 9.11 10's</i>	STORE ROOM	SHANE/935-9274 X 113						8/28/2015	NO EXPIRATION	YES 1 6's
GCMEO	PURELL HAND SANITIZER <i>10 9.11 10's</i>	STORE ROOM	SHANE/935-9274 X 113	YES					8/28/2015	3/1/2016	YES 1 6's
GCMEO	SODIUM FLUORIDE <i>10 9.11 10's</i>	AUTOPSY SUITE	SHANE/935-9274X113	YES	YES	YES	YES		8/28/2015	9/1/2016	YES 1 10's counting



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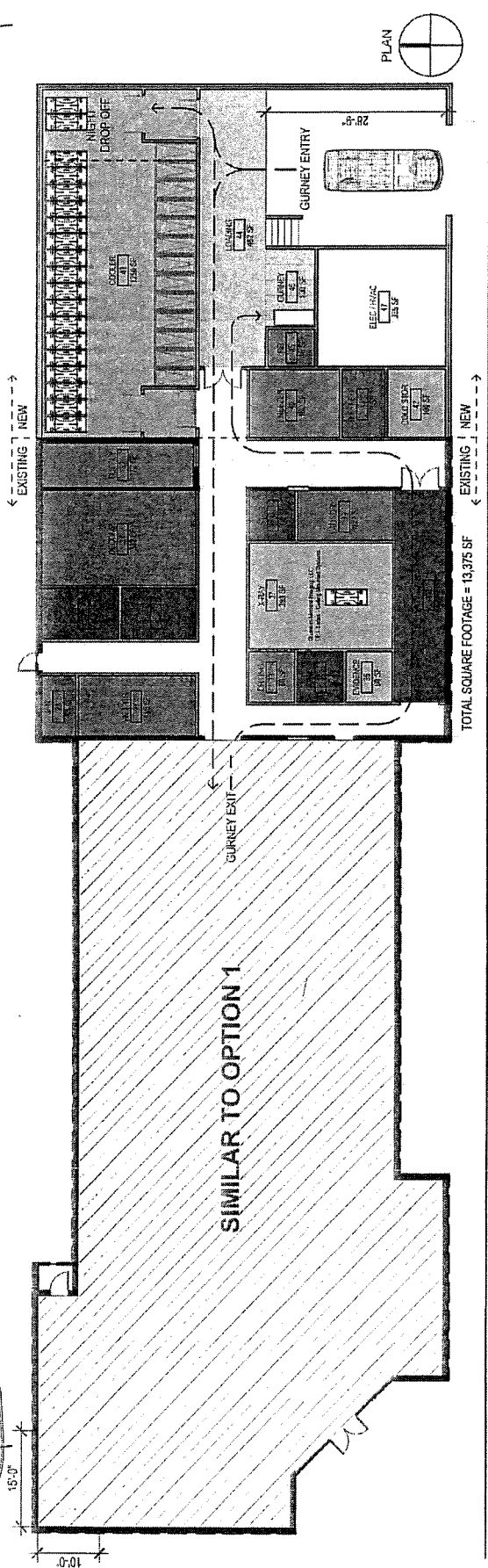
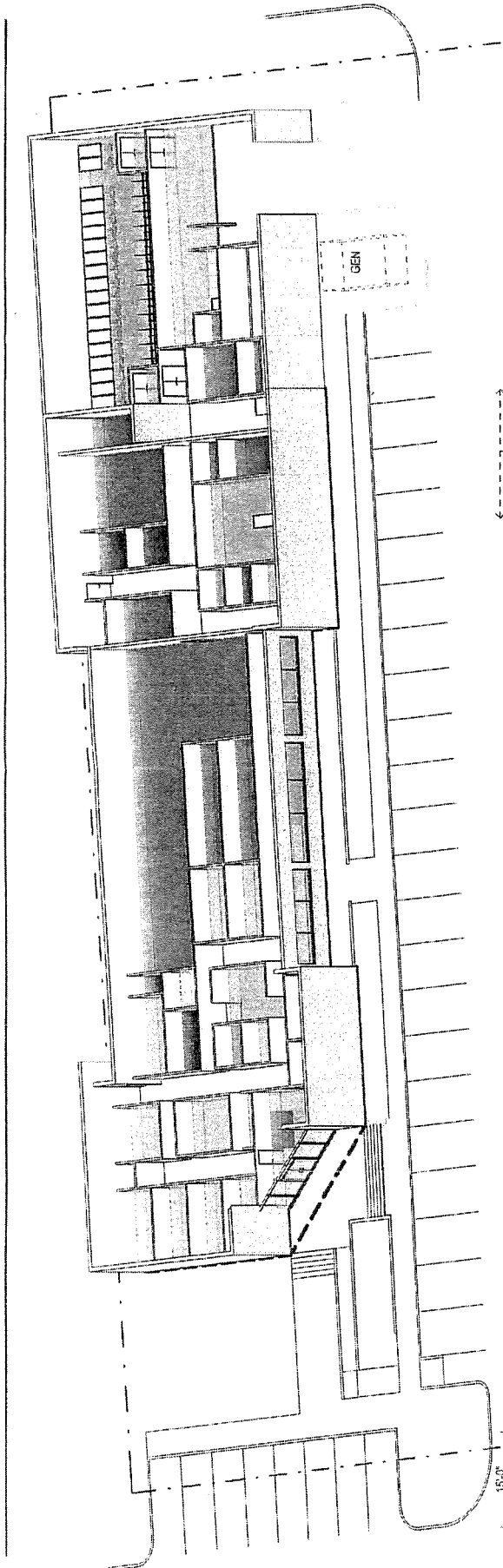












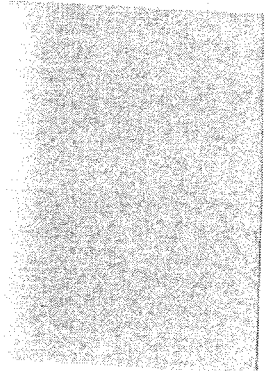
TOTAL SQUARE FOOTAGE = 13,375 SF

OPTION 2

BLOCK LAYOUT

1/16" = 1'-0"  
15 AUGUST 1983 PM





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## HVAC

### Existing Conditions

The existing HVAC roof-top units (RTUs) are not in working order and have had much of their valuable components stripped from them by thieves looking to salvage valuable materials. It is our opinion that even in good working order the existing units would not meet recommended zone or load expectations. Consequently, the system's existing five main units need replacement and additional new units to meet the functional requirements of heating, ventilating and air conditioning serving a Medical Examiner's (ME) facility able to meet NAME Certification capability.

### General Building Systems Requirements

Overall, the newly expanded building will require approximately 78 tons of cooling capacity to counteract exterior heat load, solar loads, and exhaust requirements. Loads will be met by use of new cooling-heating packaged rooftop units (RTU's) with integral natural gas heating furnaces. Of the seven new cooling zones proposed, three will serve office type loads of: Lobby and Chief's office, MD offices, and Office support type space. One additional zone will serve a combined utility space demand for cooling.

The proposed new design will provide two general exhaust systems serving the four zones listed above. These zones will be supplied and exhausted via new galvanized steel ductwork (Seal Class A per SMACNA Standards) either internally lined or externally insulated (as required) to an R-6 level of insulation. Square plaque diffusers in each room will terminate new ductwork acting as supply, return or exhaust ports in new ceilings.

### Function Specific System Requirements

Of the total new cooling capacity noted above, 64 tons will be dedicated to new Medical Examiner facility loads associated with: Autopsy, X-Ray/Storage, and Decomposition/Chemical Storage areas. Four of these zones will also see special exhaust service provided to these areas as required by NAME Certification standards.

These special ME zones will be supplied and exhausted via new galvanized steel ductwork (Seal Class A per SMACNA Standards) either internally lined or externally insulated (as required) to an R-6 level of insulation. Square plaque diffusers will terminate new ductwork in each room acting as supply, return or exhaust ports in new ceilings. Sidewall diffusers/grills and low-wall (stainless steel) exhaust grills will be used in both General and Decomposition Autopsy suites. Special exhaust systems for autopsy areas will incorporate activated-carbon filtration systems for odor control of exhausted air.

IT function space is recommended to have a 1.5 ton split-system for cooling. The loading dock is proposed to have a gas-fired unit heater. A simple Building Automation System (BAS) with start/stop and monitor/alarm points for RTUs, filter units, refrigerators, coolers, freezers, and exhaust fans will be provided.

## **ELECTRICAL**

### Existing Conditions

Main power service, Interior power distribution closets throughout the facility, and existing roof-top HVAC power contacts are not in working order and have had much of their valuable components stripped from them by thieves looking to salvage valuable materials. It is our opinion that even in good working order the existing power service, electrical closets, their distribution panels and HVAC power connections would not meet zone or load expectations in their current configuration in any event. Given the complete repurposing of the facility it is equally unlikely that ceilings and their light fixtures could survive the demolition required to install new HVAC ductwork.

The reuse of light fixtures is rarely cost effective given the labor required to salvage, clean, store, re-lamp and re-install even if they were fit for purpose in other than just the office area. Likewise, it is equally unlikely that any of the existing power outlets and their supply wiring conduits are in the right location and have adequate capacity to be reused.

Consequently, the existing main power service, power distribution panels, lighting, and power outlets will need to be replaced and augmented to meet the functional requirements of lighting and power distribution serving a Medical Examiner's (ME) facility able to meet NAME Certification capability.

### General Building Systems Requirements

Overall, the newly expanded building will require, approximately, a 1200A, 208V, 3 Phase, 4 Wire rated Main distribution panel. Distribution power panels will be required to serve lighting, general power, HVAC loads and equipment throughout the facility. New interior lighting will be LED fit to general illumination requirements. Exterior lighting will be provided by LED wall pack fixtures mounted to the building to provide security lighting at entries and exits and to the parking lot.

The newly expanded facility will have a lightning protection system installed on the roof, a new building ground loop around the building, and a full coverage fire alarm system for the entire facility. It is planned that Cable TV, a telecommunication system, any new security system, and other special systems will be provided by others. This work will be outside the scope of work described herein.

### Function Specific System Requirements

Of the total new power capacity in the 1200A service noted above, much will be backed-up by an approximately 120 KW .8 PF, 150KVA stand-by diesel generator. Skid mounted fuel storage tank will be provided to support 24 hours of operation. The generator will supply a distribution panel rated at 500A, 208V, 3 Phase, 4 Wire that will serve an ATS for emergency loads and a second ATS for optional loads via sub-distribution panels connected to these loads.

New interior LED lighting will be supplied to provide illumination as required to special ME functions as required to meet NAME Certification standards. New power distribution will be extended to Autopsy and Decomposition suites, X-Ray, Chemical Storage and associated ME functions. This new power distribution will also extend to critical refrigerators, coolers and freezers installed complete with refrigeration systems, fans, lighting, and controls.

## **PLUMBING**

### Existing Conditions

Repurposing of the existing building into a ME facility renders most of the existing fixtures and supply/waste connections less than useful. While it is the design intent to reuse the existing domestic water service entry and the sewer connection near the street, all plumbing fixtures will be replaced and most piping will be new. Age of the existing plumbing system, its overall capacities, existing locations and the cost of adaptation make upgrade and reuse of the existing systems impractical.

### General Building Systems Requirements

Current plans anticipate all domestic water supply and distribution downstream of the water service entry will be new copper piping of adequate size to meet anticipated demands for both cold and hot water. Hot water will be supplied, for both general and ME specific functions, by a new gas non-ASME rated storage-type water heater connected to new distribution piping throughout the facility. A water circulation pump will be provided to convey hot water to thermostatic mixing valves at fixtures where functions require the selection of blended temperatures. A new gas meter and associated gas piping will be provided connecting the water heater and HVAC equipment via black steel pipe.

All new fixtures and fittings will be provided for restrooms and locker/shower areas. New sanitary drains will be served via cast-iron piping above grade and PVC piping below grade to one of two sanitary sewer pipes leading to the building sewer near the frontage road. New floor drains will be provided in restrooms and mechanical rooms.

### Function Specific System Requirements

The ME functions of Autopsy, general clean-up, wash-down, cart cleaning, and locker room will generate the most tempered water demand and generate the largest waste. Hot water heater, water distribution piping, waste collection and new building sewers will be sized specifically for this increased demand associated with NAME Certifiable ME functions. All new sanitary waste piping will be installed below the slab and some larger diameter sanitary waste piping will exit the building below grade at a new location on the north and west sides of the building. New sanitary vent piping will be provided and reuse the existing roof terminations where possible.

New primary roof drains, flashing and interior downspouts to an underground collection system will be provided. Scuppers will be used for overflow of any storm water collecting on the roof. Cast-iron piping will be used above grade and PVC piping below grade for this system.

No permanently installed fire protection system is anticipated at this time. Adequate egress distance and location within this construction type permit such a use as designed. County underwriter expectations that lead to operational cost savings may be a factor in the final determination if such a system might be beneficial.





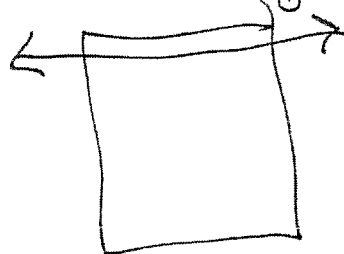
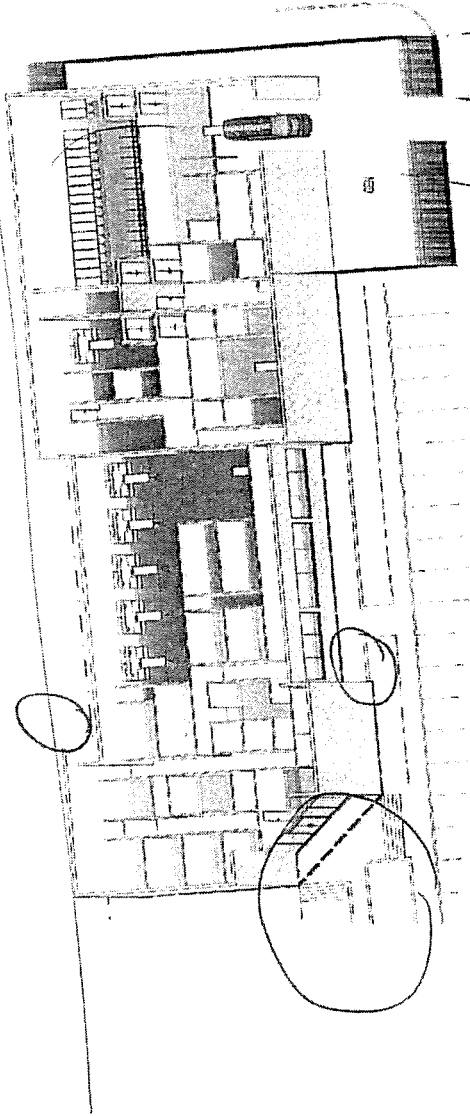
Design Criteria  
Applicable Codes  
Study Schedule  
Program/Space Needs Lists  
Optional Layout Studies  
Selected Layout Study  
MEP Narrative  
**Construction Cost Estimate**  
Meeting Notes

# Parameter/Program Estimate

## Galveston County ME Office Relocation

La Marque, TX

13,375 SQFT



Submitted to:  
**HOK**

3200 SW Freeway, Suite 900  
Houston, TX 77027

Owner:  
**Galveston County ME Office**



GETTING OUR VALUE

11761 Katy Freeway  
Suite 370  
Houston, TX 77078  
832.288.4752  
www.ccsintertec.com

1/5/2016

CCS Project # 15.121

January 5, 2016

**Galveston County ME Office Relocation  
La Marque, TX**

Description	Gross SOFT	Raw Cost	General Conditions Overhead & Profit 18%	Design Contingency 15%	Escalation 10%	Total Cost	Cost/ SQFT
Renovated Building	9,931	\$1,799,953	\$323,991	\$ 318,592	\$ 244,254	\$2,686,791	\$270.55
New Building Addition	3,444	\$867,241	\$156,103	\$ 163,502	\$ 117,685	\$1,294,531	\$375.88
<b>Construction Totals</b>	<b>13,375</b>	<b>\$2,667,194</b>	<b>\$480,095</b>	<b>\$472,093</b>	<b>\$361,938</b>	<b>\$3,981,321</b>	<b>\$297.67</b>
<b>Additional Medical Equipment/Furnishings - ADDS</b>							
Autopsy Workstations	7 EACH	\$52,500	\$9,450	\$ 9,283	\$ 7,124	\$78,367	
Autopsy Scale	1 EACH	\$12,500	\$2,250	\$ 2,213	\$ 1,696	\$18,659	
Training Microscope	1 EACH	\$7,500	\$1,350	\$ 1,328	\$ 1,018	\$11,195	
Surgical Lights & Supports	7 EACH	\$60,000	\$10,800	\$ 10,620	\$ 8,142	\$89,562	
Evidence Drying Chamber	1 EACH	\$7,500	\$1,350	\$ 1,328	\$ 1,018	\$11,195	
Unistrut in X-Ray Room	1 LSUM	\$30,000	\$5,400	\$ 5,310	\$ 4,071	\$44,781	
X-Ray Room Prep	1 LSUM	\$32,000	\$5,760	\$ 5,664	\$ 4,342	\$47,766	
Special Mechanical Systems in Autopsy/Decomp	1 LSUM	\$92,520	\$16,654	\$ 16,376	\$ 12,555	\$136,105	
Storage Racks/Shelving	1 LSUM	\$19,000	\$3,420	\$ 3,363	\$ 2,578	\$28,361	
Book Shelves	1 LSUM	\$12,000	\$2,160	\$ 2,124	\$ 1,628	\$17,912	
White Boards	1 LSUM	\$12,750	\$2,295	\$ 2,257	\$ 1,730	\$19,032	
Appliances - Breakroom-Autopsy-Decomp	1 LSUM	\$12,500	\$2,250	\$ 2,213	\$ 1,696	\$18,659	
Lockers	1 LSUM	\$7,000	\$1,260	\$ 1,239	\$ 950	\$10,449	
Coolers/Freezers	1 LSUM	\$305,000	\$54,900	\$ 53,985	\$ 41,389	\$465,274	
Lifting Equipment - Dock and Cooler	1 LSUM	\$24,500	\$4,410	\$ 4,337	\$ 3,325	\$36,571	
<b>Project Totals</b>		<b>\$3,354,464</b>	<b>\$603,803</b>	<b>\$593,740</b>	<b>\$455,201</b>	<b>\$5,007,209</b>	<b>\$374.37</b>

Hill Country Building  
Suite 370  
Houston, TX 77059  
631.288.6382  
www.hillcountrybuilding.com



**NOTES REGARDING THIS ESTIMATE:**

This Program estimate is based on program data, as well as concept floor plans prepared by the office of HOK dated 11-24-2015 together with discussions and supplemental information .

This estimate assumes a normal market condition.

This estimate assumes five or more qualified General Subcontractors competitively bidding on bid packages for this project.

This estimate assumes a competitively bid contract ( Design Bid Build approach )

Those cost estimates provided by the Architect and/or Consultants are identified in the body of the estimate.

Escalation is included assuming 09-01-2016 as the start of construction and 09-01-2017 as the substantial completion of construction.

**THIS ESTIMATE EXCLUDES:**

- 1) Professional fees, testing, moving expense, etc. for Owner's account,
- 2) Furnishings and equipment other than those shown in the body of the estimate,
- 3) Premium costs for work done in phases, out of sequence, out of hours,
- 4) Owner provided items
- 5) Hazardous material removal and abatement,
- 6) Construction Contingencies.
- 7) White Boards are considered FFE.
- 8)
- 9)

This estimate is based on preliminary information available at this time. The scope of this estimate should be reviewed to insure our interpretation of the drawings and other information is correct. This estimate should be updated as the design evolves and is completed.

This cost estimate represents our opinion of probable construction cost for this project. We have exercised due professional diligence in the preparation of this estimate. Since we have no control over final material selection, bidding strategies and market conditions, no guarantee is given or implied with this estimate.

**Building Systems Outline**

**01 - FOUNDATIONS**

New Foundations and select fill is included in the New Addition Estimate.

**02 - SUBSTRUCTURE**

New Grade Beams are included in the New Addition Estimate.

**03 - SUPERSTRUCTURE**

New Superstructure is included for the New Building Addition Estimate. This will be a pre-engineered building.

**04 - EXTERIOR CLOSURE**

New Exterior Closure will be metal panels in the New Building Addition.  
Minor repairs on the exterior skin is included in the Renovation Building Estimate.

**05 - ROOFING**

New Roofing is included for the New Building Addition Estimate. This will be standing seam metal roofing.  
New roofing similar to existing is included for the Renovation Building Estimate.  
Solutubes are included in the Renovation Building Estimate.  
Fall Protection Cables and Davits are included in the Renovation Building Estimate.

**06 - INTERIORS**

Wall Finishes are painted for Offices, Work Areas and Corridors.  
Ceramic Tile has been included for walls in Restrooms and Gowning Rooms.  
FRP Panels have been included in Autopsy Area, DeComp Room, Dirty Cart Room and Janitor's Closet.  
Carpet has been included for flooring in Offices, Work Areas, Conference Room, and Corridors.  
Epoxy Flooring has been included for Autopsy Area, DeComp Room, Coolers and Freezers.  
VCT Flooring has been included for Breakroom, Storage, Janitor Closet and IT Room.  
Lay-in Acoustical Ceilings have been included in Offices, Work Areas and Corridors.  
Gypsum Ceilings have been included in Autopsy Area, DeComp Room, Wet Tissue Room, Restrooms and Gowning Rooms.

Project - Galveston County ME Office Relocation

1/5/2015

**Building Systems Outline**

**08 - PLUMBING**

Estimate includes new fixtures for all restrooms.  
New piping where required is included in the estimate.  
New sanitary piping is included in the estimate.

**08 - HVAC**

HVAC is included per notes received 12/2/2015

**08 - FIRE PROTECTION**

No Fire Sprinkler Protection is included in the estimate.

**08 - SPECIAL MECHANICAL**

Special mechanical systems for the autopsy area and DeComp area is included in the estimate.

**Building Systems Outline**

**09 - ELECTRICAL - SERVICE & DISTRIBUTION**

No underground electrical service. OH drop Utility is included in the estimate.  
Generator is in close location outside building.

**09 - ELECTRICAL - LIGHTING AND POWER**

LED lighting is included in the estimate.

Exam Lights and Supports are included for Autopsy Workstations.

**09 - ELECTRICAL - SPECIAL ELECTRICAL**

No cable TV is included in the estimate.

Telecom is boxes & conduit only.

Security not included. 120V req'd is included.

CCTV is not included in the estimate.

AV is not included in the estimate.

No others special systems are included.

**10 - GENERAL CONDITIONS OVERHEAD AND PROFIT**

Costs of 18% of the Cost of Work has been added for General Contractor's General Conditions, Project Requirements and Fee.

**11 - EQUIPMENT**

Metal casework with Resin Top has been included in the estimate.

Autopsy Workstations have been included in the estimate.

**12 - SITEWORK**

Modifications to the existing parking area has been included.

New Security Screen Fence has been included.

Allowance for new modified Entry has been included. Select fill and concrete foundations have been included.

**13 - CONTINGENCIES**

Costs of 15% of the Cost of Work has been added for Design Contingency.

Costs of 10% of the Cost of Work has been added for Escalation.

PARAMETER COSTING MODEL

Project - Galveston County ME Office Relocation  
RENOVATION

GROSS AREA: 9931 SF

1/5/2016

COST SUMMARY

DESCRIPTION TOTAL COST

RATE/SF % of Total

01 - FOUNDATIONS \$0 \$0.00 0%

011 - Standard Foundations \$0 \$0.00  
012 - Special Foundations \$0 \$0.00

02 - SUBSTRUCTURE \$0 \$0.00 0%

021 - Slab on Grade \$0 \$0.00  
022 - Basement Excavation \$0 \$0.00  
023 - Basement Walls \$0 \$0.00

03 - SUPERSTRUCTURE \$119,172 \$12.00 4%

031 - Floor Construction \$0 \$0.00  
032 - Roof Construction \$0 \$0.00  
033 - Stair Construction \$119,172 \$12.00

04 - EXTERIOR CLOSURE \$47,500 \$4.78 2%

041 - Exterior Walls \$15,000 \$1.51  
042 - Exterior Doors & Windows \$32,500 \$3.27

05 - ROOFING \$174,465 \$17.57 6%

06 - INTERIOR CONSTRUCTION \$533,519 \$53.72 20%

061 - Partitions \$210,895 \$21.24  
062 - Interior Finishes \$132,024 \$13.29  
063 - Specialties \$190,600 \$19.19

07 - CONVEYING SYSTEMS \$0 \$0.00 0%

08 - MECHANICAL \$546,205 \$55.00 20%

081 - Plumbing \$148,965 \$15.00  
082 - HVAC \$397,240 \$40.00  
083 - Fire Protection \$0 \$0.00  
084 - Special Systems \$0 \$0.00



PARAMETER COSTING MODEL

Project - Galveston County ME Office Relocation  
RENOVATION

GROSS AREA: 9931 SF

1/5/2016

COST SUMMARY

DESCRIPTION	TOTAL COST	RATE/SF	% of Total
-------------	------------	---------	------------

**09 - ELECTRICAL** \$360,992 \$36.35 13%

091 - Service & Distribution	\$172,303	\$17.35	
092 - Lighting & Power	\$148,965	\$15.00	
093 - Special Systems	\$39,724	\$4.00	

**10 - GENERAL CONDITIONS & PROFIT** \$323,992 \$32.62 12%

NET BUILDING CONSTRUCTION COST \$2,105,844

**11 - EQUIPMENT** \$18,100 \$1.82 1%

111 - Fixed & Movable Equipment	\$18,100	\$1.82	
112 - Furnishings	\$0	\$0.00	
113 - Special Construction	\$0	\$0.00	

**12 - SITEWORK** \$0 \$0.00 0%

121 - Site Preparation	\$0	\$0.00	
122 - Site Improvements	\$0	\$0.00	
123 - Site Utilities	\$0	\$0.00	
124 - Off-site Work	\$0	\$0.00	

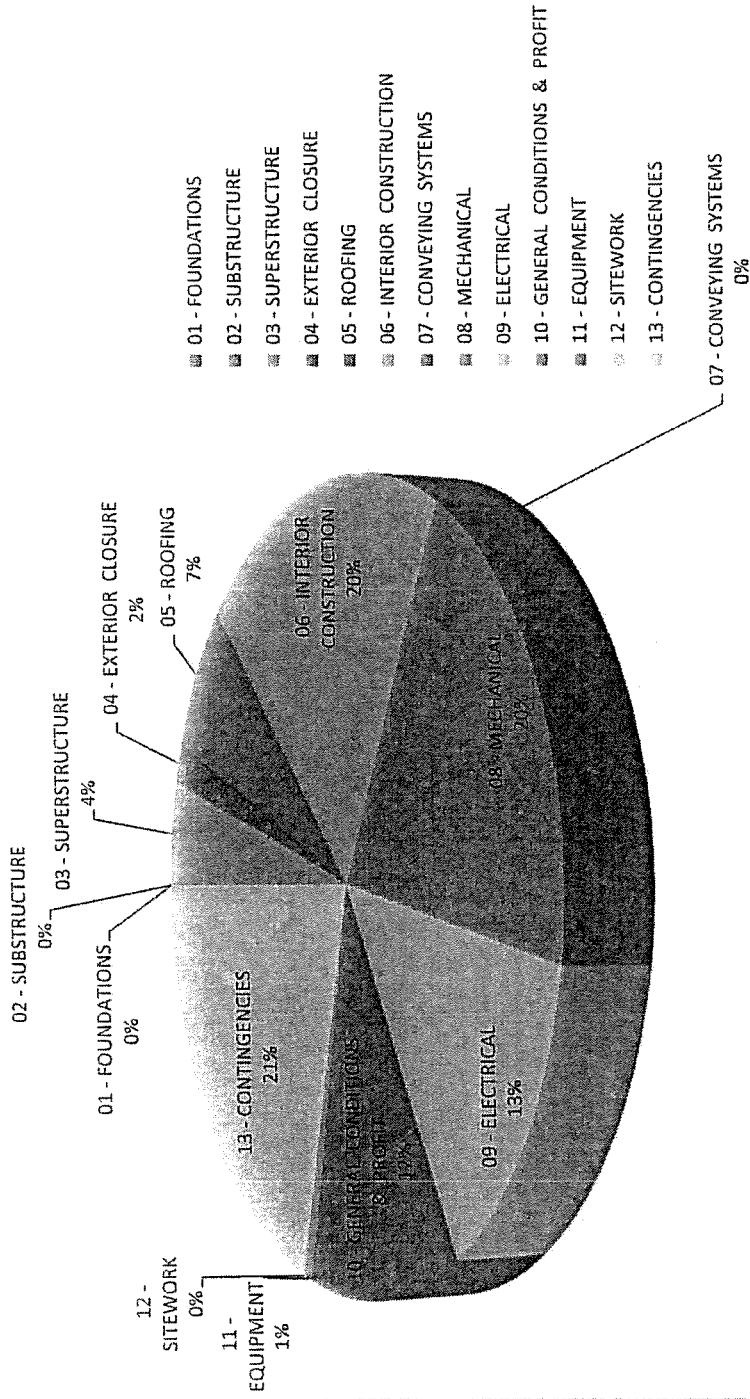
NET PROJECT CONSTRUCTION COST \$2,123,944

**13 - CONTINGENCIES** \$562,845 \$56.68 21%

131 - Design - 15%	\$318,592	\$32.08	
132 - Escalation - 12%	\$244,254	\$24.60	

**TOTAL PROJECT CONSTRUCTION COST** \$2,686,790 \$270.55

### Estimated Cost Breakdown



PARAMETER COSTING MODEL

Core and Shell

1/5/2015

Project - Galveston County ME Office Relocation

RENOVATION SHELL COST \$125,70

DESCRIPTION	ITEM	QUANTITY	UNIT	UNIT PRICES	TOTAL
<b>STRUCTURE</b>					
Basement excavation		0	CY		\$0
Mass Excavation		0	CY		\$0
Mass Fill		0	CY		\$0
Foundation Wall & Footing		0	LF		\$0
Column Footing		0	EA		\$0
Slab on Grade		0	SF		\$0
Basement Wall w/ Footing		0	LF		\$0
Elevated Floor Structure		0	SF		\$0
Roof Structure		9931	SF	\$12.00	\$119,172
Demolition of Existing			EA		
<b>ENVELOPE</b>					
Exterior Enclosure		1	LS	\$15,000.00	\$15,000
Window Wall		224	SF	\$125.00	\$28,000
Exterior Doors		1	LS	\$4,500.00	\$4,500
Sallyport		0	EA		\$0
Roofing		9931	SF	\$15.00	\$148,965
Skylight/Parapet		7	EA	\$750.00	\$5,250
Roof Edge		450	LF	\$45.00	\$20,250
<b>CONVEYING SYSTEMS</b>					
Elevators etc.		0	EA		\$0
<b>MECHANICAL</b>					
Plumbing		9931	SF	\$15.00	\$148,965
H.V.A.C		9931	SF	\$40.00	\$397,240
Fire Protection		9931	SF	\$0.00	\$0
Special Mechanical		9931	SF	\$0.00	\$0
<b>ELECTRICAL</b>					
Service & distribution		9931	SF	\$17.35	\$172,303
Lighting & Power		9931	SF	\$15.00	\$148,965
Special systems		9931	SF	\$4.00	\$39,724
<b>TOTAL CORE /SHELL COST</b>					<b>\$1,248,334</b>
<b>RATE/SF</b>					<b>\$125.70</b>

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**PARAMETER COSTING MODEL**

(Cost Incl Core and Shell)

(Excl Markups and Sitework)

RENOVATION

Shell Cost

ST125.Z1D

SPACE	TOTAL S.F.	AVE S.F.	NO. OF SPACES	PTN. LENGTH	PTN. S/LF	PTN. S/LF	DEMO S/SPACE	DOOR S/SPACE	FLOOR S/SF	CLG S/SF	MECH S/SF	ELECT S/SF	EQUIP SPECIAL	TOTAL COST	COST S.F.
<b>SPACE PROGRAM</b>															
1 - Lobby/Reception	323	323	1	36	\$161.00	\$0.00	\$3,000	\$5.00	\$6.00	\$0.00	\$0.00	\$0.00	\$7,650	\$60,600	\$187.62
2 - View/Greave	60	60	1	15	\$133.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$11,667	\$194.45
3 - Restroom	47	47	1	14	\$155.00	\$0.00	\$1,500	\$5.00	\$8.00	\$0.00	\$0.00	\$0.00	\$7,650	\$18,309	\$389.55
4 - MD Office	147	147	1	24	\$138.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$24,616	\$167.46
5 - MD Office	150	150	1	24	\$138.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$25,017	\$166.78
6 - MD Office	150	150	1	24	\$138.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$25,017	\$166.78
7 - MD Office	150	150	1	24	\$138.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$25,017	\$166.78
8 - Janitor Closet	27	27	1	10	\$138.00	\$0.00	\$1,500	\$3.00	\$2.00	\$0.00	\$0.00	\$0.00	\$150	\$6,559	\$242.92
9 - MD Office	150	150	1	24	\$138.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$25,017	\$166.78
10 - Large Conference Room	178	178	1	27	\$151.00	\$0.00	\$6,000	\$5.00	\$6.00	\$0.00	\$0.00	\$0.00	\$150	\$34,560	\$194.16
11 - Print Room	65	65	1	16	\$133.00	\$0.00	\$0	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$3,650	\$14,469	\$222.59
12 - Chief Room	160	160	1	25	\$133.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$26,367	\$164.79
13 - Storage	40	40	1	13	\$133.00	\$0.00	\$1,500	\$3.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$8,647	\$216.18
14 - Admin Workroom	196	196	1	28	\$148.00	\$0.00	\$3,000	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$10,150	\$43,499	\$221.94
15 - Admin Office	65	65	1	16	\$138.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$2,650	\$15,049	\$231.52
16 - Break Room	175	175	1	26	\$161.00	\$0.00	\$0	\$3.00	\$5.00	\$0.00	\$0.00	\$0.00	\$26,150	\$53,734	\$307.05
17 - IT Room	65	65	1	16	\$133.00	\$0.00	\$1,500	\$3.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$12,339	\$189.82
18 - Investigator	160	160	1	25	\$138.00	\$0.00	\$1,500	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$150	\$26,492	\$165.58
19 - Women Restroom	150	150	1	24	\$155.00	\$0.00	\$1,500	\$15.00	\$8.00	\$0.00	\$0.00	\$0.00	\$20,150	\$47,675	\$317.83
20 - Gowning	206	206	1	29	\$155.00	\$0.00	\$3,000	\$15.00	\$8.00	\$0.00	\$0.00	\$0.00	\$8,650	\$46,777	\$227.07
21 - Men restroom	150	150	1	24	\$155.00	\$0.00	\$1,500	\$15.00	\$8.00	\$0.00	\$0.00	\$0.00	\$20,150	\$47,675	\$317.83
22 - Gowning	206	206	1	29	\$155.00	\$0.00	\$3,000	\$15.00	\$8.00	\$0.00	\$0.00	\$0.00	\$8,650	\$46,777	\$227.07
23 - Autopsy Room	1749	1749	1	84	\$138.00	\$0.00	\$3,000	\$15.00	\$8.00	\$0.00	\$0.00	\$0.00	\$33,150	\$307,820	\$176.00
24 - Wet Tissue Room	242	242	1	31	\$138.00	\$0.00	\$1,500	\$15.00	\$8.00	\$0.00	\$0.00	\$0.00	\$5,650	\$47,414	\$195.92
25 - Print/File Area	153	153	1	25	\$130.00	\$0.00	\$0	\$5.00	\$3.00	\$0.00	\$0.00	\$0.00	\$5,150	\$28,856	\$188.60

Project - Galveston County ME Office Relocation  
**RENOVATION**  
 Shell Cost \$125.70

PARAMETER COSTING MODEL  
 (Cost Incl. Core and Shell)  
 (Excl. Markups and Sitework)

1/5/2016

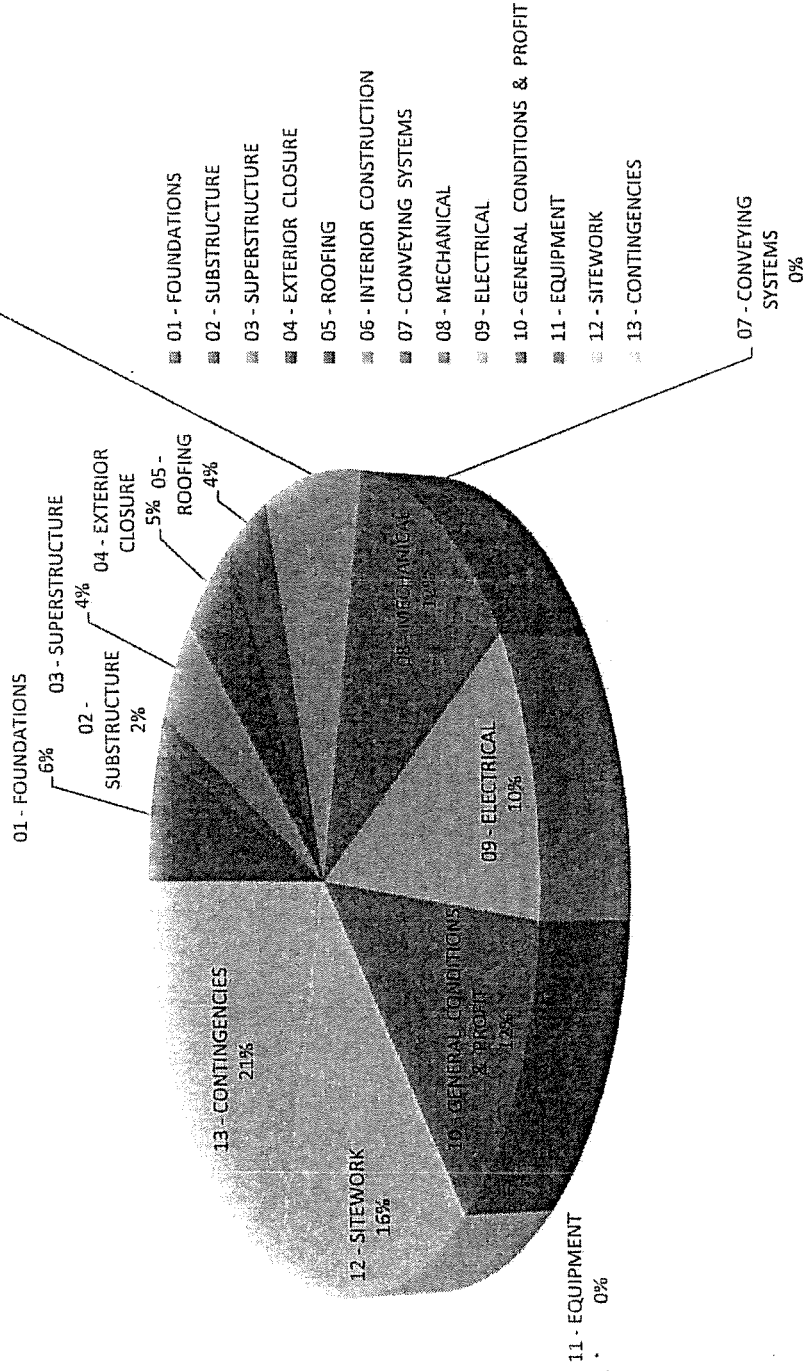
SPACE	TOTAL S.F.	AVE S.F.	NO. OF SPACES	PTN. LENGTH	PTN.	PTN. \$/LF	DEMO \$/SF	DOOR \$/SPACE	FLOOR \$/SF	CLG \$/SF	MECH \$/SF	ELECT \$/SF	EQUIP \$/SF	SPECIAL	TOTAL COST	COST S.F.
25 - Chem Room	103	103	1	0		\$138.00	\$0.00	\$1,500	\$12.00	\$8.00	\$0.00	\$0.00	\$5,150		\$21,657	\$210.26
26 - Tech Area	197	197	1	28		\$138.00	\$0.00	\$0	\$12.00	\$8.00	\$0.00	\$0.00	\$5,150		\$37,717	\$191.46
26 - Hist Room	100	100	1	20		\$138.00	\$0.00	\$1,500	\$12.00	\$8.00	\$0.00	\$0.00	\$5,150		\$23,980	\$239.80
27 - DeComp Room	307	307	1	35		\$143.00	\$0.00	\$6,000	\$15.00	\$8.00	\$0.00	\$0.00	\$13,650		\$70,306	\$229.01
28 - Supply Room	172	172	1	26		\$133.00	\$0.00	\$1,500	\$3.00	\$2.00	\$0.00	\$0.00	\$150		\$27,589	\$160.40
29 - Storage	60	60	1	15		\$133.00	\$0.00	\$1,500	\$3.00	\$3.00	\$0.00	\$0.00	\$150		\$11,547	\$192.45
30 - Laundry	123	123	1	22		\$133.00	\$0.00	\$1,500	\$3.00	\$3.00	\$0.00	\$0.00	\$4,150		\$24,775	\$201.42
31 - X-Ray Room	393	393	1	40		\$133.00	\$0.00	\$1,500	\$12.00	\$8.00	\$0.00	\$0.00	\$2,650		\$66,730	\$169.50
32 - Drying	60	60	1	15		\$133.00	\$0.00	\$1,500	\$12.00	\$3.00	\$0.00	\$0.00	\$1,650		\$13,587	\$226.45
33 - Evidence/DNA Room	122	122	1	22		\$133.00	\$0.00	\$1,500	\$3.00	\$3.00	\$0.00	\$0.00	\$1,650		\$22,143	\$181.50
34 - Dirty Cart	269	269	1	33		\$138.00	\$0.00	\$6,000	\$12.00	\$5.00	\$0.00	\$0.00	\$7,650		\$56,590	\$210.37
44 - Corridors	2861	2861	1	107		\$138.00	\$0.00	\$1,500	\$0.00	\$6.00	\$0.00	\$0.00	\$300		\$393,362	\$137.49
GROSS SF	5931														\$1,799,953	\$181.25
SUB TOTAL BUILDING COST																
NET PROJECT COST																
G.C.O.H & P 18.00%																
CONTINGENCY 15.00%																
ESCALATION 10.00%																
TOTAL PROJECT CONSTRUCTION COST \$2,686,790 \$270.55																



PARAMETER COSTING MODEL  
 Project: Galveston ME Office Relocation  
 NEW BUILDING ADDITION  
 GROSS AREA: 3444 SF  
 1/5/2016  
**COST SUMMARY**

DESCRIPTION	TOTAL COST	RATE/SF	% of Total
<b>09 - ELECTRICAL</b>	\$137,122	\$39.81	11%
091 - Service & Distribution	\$60,947	\$17.70	
092 - Lighting & Power	\$57,626	\$16.73	
093 - Special Systems	\$18,549	\$5.39	
<b>10 - GENERAL CONDITIONS &amp; PROFIT</b>	\$156,103	\$45.33	12%
NET BUILDING CONSTRUCTION COST			
<b>11 - EQUIPMENT</b>	\$300	\$0.09	0%
111 - Fixed & Movable Equipment	\$300	\$0.09	
112 - Furnishings	\$0	\$0.00	
113 - Special Construction	\$0	\$0.00	
<b>12 - SITEWORK</b>	\$202,280	\$58.73	16%
121 - Site Preparation	\$55,280	\$16.05	
122 - Site Improvements	\$102,000	\$29.62	
123 - Site Utilities	\$45,000	\$13.07	
124 - Off-site Work	\$0	\$0.00	
NET PROJECT CONSTRUCTION COST			
<b>13 - CONTINGENCIES</b>	\$271,186	\$78.74	21%
131 - Design - 15%	\$153,502	\$44.57	
132 - Escalation - 12%	\$117,685	\$34.17	
<b>TOTAL PROJECT CONSTRUCTION COST</b>	<b>\$1,294,530</b>	<b>\$375.88</b>	

### Estimated Cost Breakdown





PARAMETER COSTING MODEL

Core and Shell

1/5/2016

Project - Galveston ME Office Relocation

NEW BUILDING ADDITION

SHELL COST \$166.82

DESCRIPTION	ITEM	QUANTITY	UNIT	UNIT PRICES	TOTAL
<b>STRUCTURE</b>					
	Basement excavation	0	CY	\$0.00	\$0
	Mass Excavation	0	CY	\$16.00	\$0
	Mass Fill	714	CY	\$20.00	\$14,280
	Foundation Wall & Footing	454	LF	\$125.00	\$56,750
	Column Footing	12	EA	\$1,500.00	\$18,000
	Slab on Grade	3444	SF	\$6.00	\$20,664
	Basement Wall w/ Footing	0	LF	\$0.00	\$0
	Elevated Floor Structure	0	SF	\$0.00	\$0
Pre-engineered Structure	Building Structure	3444	SF	\$17.00	\$58,548
	Stairs	0	EA	\$0.00	\$0
<b>ENVELOPE</b>					
Metal Panels - Partially Insulated	Exterior Enclosure	3008	SF	\$20.00	\$60,160
	Window Wall	0	SF	\$85.00	\$0
	Exterior Doors	0	EA	\$0.00	\$0
	Garage Opening Door	1	EA	\$15,000.00	\$15,000
Metal Standing Seam	Roofing Panels	3444	SF	\$12.00	\$41,328
	Skylight	0	LF	\$0.00	\$0
	Roof Edge	254	LF	\$25.00	\$6,350
<b>CONVEYING SYSTEMS</b>					
	Elevators etc.	0	EA	\$0.00	\$0
<b>MECHANICAL</b>					
None at Cooler/Freezer Areas	Plumbing	3444	SF	\$22.00	\$75,768
	H.V.A.C	2000	SF	\$41.25	\$82,500
	Fire Protection	3444	SF	\$0.00	\$0
	Special Mechanical	3444	SF	\$0.00	\$0
<b>ELECTRICAL</b>					
	Service & distribution	3444	SF	\$17.35	\$59,753
	Lighting & Power	3444	SF	\$15.00	\$51,660
	Special systems	3444	SF	\$4.00	\$13,776
<b>TOTAL CORE /SHELL COST</b>					<b>\$574,537</b>
<b>RATE/SF</b>					<b>\$166.82</b>

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**PARAMETER COSTING MODEL**  
 (Cost Incl. Core and Shell)  
 (Excl. Markups and Sitework)

Project - Galveston ME Office Relocation  
 NEW BUILDING ADDITION  
 Shell Cost \$166,92

SPACE	TOTAL S.F.	AVE S.F.	NO. OF SPACES	PTN. LENGTH	PTN. S/LF	DEMO \$/SF	DOOR \$/SPACE	FLOOR \$/SF	CLG \$/SF	MECH \$/SF	ELECT \$/SF	EQUIP SPECIAL	TOTAL COST	COST S.F.
<b>PROGRAM SPACE</b>														
35 - Freezer	160	160	1	0	\$130.00	\$0.00	\$0	\$15.00	\$0.00	\$0.00	\$7.50	\$150	\$30,442	\$190.26
36 - Deep Freeze	75	75	1	17	\$130.00	\$0.00	\$0	\$15.00	\$0.00	\$0.00	\$7.50	\$150	\$16,559	\$220.79
37 - Cold Storage	100	100	1	20	\$130.00	\$0.00	\$0	\$15.00	\$0.00	\$0.00	\$7.50	\$150	\$21,682	\$216.82
38 - Cooler	1256	1256	1	71	\$130.00	\$0.00	\$0	\$15.00	\$0.00	\$0.00	\$7.50	\$150	\$247,169	\$196.79
39 - Loading Area	482	482	1	44	\$138.00	\$0.00	\$6,000	\$3.00	\$2.00	\$0.00	\$0.00	\$150	\$95,041	\$197.18
40 - Restroom	46	46	1	14	\$163.00	\$0.00	\$1,500	\$15.00	\$8.00	\$0.00	\$0.00	\$7,650	\$20,164	\$438.34
41 - Gurney Storage	100	100	1	20	\$138.00	\$0.00	\$0	\$3.00	\$3.00	\$0.00	\$0.00	\$150	\$20,192	\$201.92
42 - Elec/Mach Room	385	385	1	39	\$138.00	\$0.00	\$1,500	\$3.00	\$3.00	\$0.00	\$0.00	\$150	\$73,569	\$191.09
43 - Garage Entry	740	740	1	54	\$138.00	\$0.00	\$0	\$15.00	\$2.00	\$5.00	\$0.00	\$150	\$147,331	\$199.10
44 - Corridors	100	100	1	20	\$138.00	\$0.00	\$1,500	\$5.00	\$5.00	\$0.00	\$0.00	\$150	\$22,092	\$220.92

GROSS SF 3444

SUB TOTAL BUILDING COST \$694,241

SITE PREPARATION \$26,000  
 SITE IMPROVEMENTS \$102,000  
 SITE UTILITIES \$45,000

NET PROJECT COST \$867,241  
 G.C.O.H & P 18.00% \$156,103  
 CONTINGENCY 15.00% \$153,502  
 ESCALATION 10.00% \$117,685

**TOTAL PROJECT CONSTRUCTION COST \$1,294,530**

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Project - Galveston ME Office Relocation  
 NEW BUILDING ADDITION

1/5/2016

SITE PREPARATION

DESCRIPTION	QUANTITY	UM	UNIT COST	ESTIMATED COST
Demo Site	4,000	SQFT	\$5.00	\$20,000
Clear and Grub	4,000	SQFT	\$1.50	\$6,000

TOTAL

\$26,000

Project - Galveston ME Office Relocation  
 NEW BUILDING ADDITION

1/5/2016

SITE IMPROVEMENTS

DESCRIPTION	QUANTITY	U/M	UNIT COST	ESTIMATED COST
Renovate Parking	1	LSUM	\$15,000.00	\$15,000
New Entry Allowance	1	LSUM	\$50,000.00	\$50,000
New Security Fence	1	LSUM	\$12,000.00	\$12,000
New Landscape/Irrigation Allowance	1	LSUM	\$25,000.00	\$25,000

TOTAL

\$102,000

Project - Galveston ME Office Relocation  
 NEW BUILDING ADDITION

1/5/2016

SITE UTILITIES	DESCRIPTION	QUANTITY	UM	UNIT COST	ESTIMATED COST
Electrical Utilities - Allowance		1	LSUM	\$35,000.00	\$35,000
Sanitary Utilities - Allowance		1	LSUM	\$20,000.00	\$20,000
Water Line Utilities - Allowance		1	LSUM	\$25,000.00	\$25,000

**TOTAL \$45,000**



Design Criteria  
Applicable Codes  
Study Schedule  
Program/Space Needs Lists  
Optional Layout Studies  
Selected Layout Study  
MEP Narrative  
Construction Cost Estimate  
Meeting Notes



# Meeting Notes

3200 Southwest Freeway, Suite 900  
 Houston, TX 77027 USA  
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Project Medical Examiner Relocation Study  
 Client Galveston County  
 Date Prepared October 22, 2015  
 Project Number 15-10073-00  
 File D4.1

Meeting Location	Galveston ME Offices	Meeting Time/Date	9:00 – 2:00 October 22, 2015
Prepared By	David Reese	Meeting Purpose	Design Kickoff
Participants	Galveston ME: Dr. Erin Barnhart Nicole Shane  Galveston County Architect: Dudley Anderson HOK: Neil Bustamante, David Reese Consultant: CCS-Jim Nuckolls		

Copies To: file

Purpose of the meeting was to discuss the organization and description of feasibility study: approach, tasks, and schedule, plus tour existing, establish expectations and walk-through the South Oak Street facility.

Item	Discussion	Recommendation/Action	Action By
1	Deputy Chief Dr. Nobby Mambo and Mike Bell were identified as additional stakeholders by the County who may need to be included in future meetings.	Dr. Barnhart and Mr. Anderson will identify when meetings require their participation and extend invitations accordingly.	County & HOK
2	When products of this study require Commissioner review the County will coordinate the process.	HOK will provide: information, findings, reports, concepts, and cost estimates to the County for "review" distribution.	County & HOK
3	A Programming Session is scheduled for 1:00PM at HOK's office on 28 October.	HOK will forward meeting invitation and location information to County stakeholders	HOK
4	Issues of Data Gathering, Programming, Concept Development, Cost Estimating and Report Development were discussed.	It was determined that existing South Oak HVAC and utilities are unlikely to be reused given their deteriorated condition.	
5	Construction Cost Estimating was discussed to include parametric and abbreviated quantity survey approaches to enhance accuracy throughout feasibility analysis.	It was established that FFE (items not anchored in the building) were not generally part of the building construction estimate, but that estimated prices could be provided for specific FFE items identified by the County	County, HOK & CCS
6	The overall feasibility project-schedule proposed by HOK was reviewed and found generally acceptable.	The County requested Commissioner preview packages after the 11/19 review and in early December prior to publication of the study report.	HOK
7	Dr. Barnhart provided: SWGMDI 2013 Recommendations, Forensic Magazine's Specialized Design for Specialized Needs, and the NAME 2009 Checklist for HOK review and application	HOK will review and apply this information as it relates to the 1.3 million population they serve and associated ME demographics.	HOK
8	During a brief tour of the existing ME operation it was determined that the entry needs to provide secure access to a	Programming Discussion	County & HOK



## Meeting Notes

	reception area, small waiting area, a Bereaved Family Room, and a secure conference room for visitors/users outside all secured ME functional areas.		
9	Need was identified for Administration Workstations (3), Administrative Office (1) and Investigator Office (1) inside secure area	Programming Discussion	
10	A need for Doctor's Offices (4-5), Guest Office (1) and Technician Workstations (3-5 near morgue/autopsy suites) were discussed.	Programming Discussion	County & HOK
11	Storage of all sorts are underserved in the existing building. The County stakeholders will initiate a study of types and areas of storage required to meet their future needs.	Programming Discussion	County & HOK
12	The County proposed a population of this size should have between 4 and 6 autopsy tables/grossing workstations in addition to a decomposition/isolation room (with dedicated exhaust) to support their growing (1,200+/yr) case load.	Programming Discussion	County & HOK
13	Grossing workstations to have sinks, robust disposals, suspended gravity scales (not electronic) over the sinks, natural light and view of a large marker board.	Programming Discussion	County & HOK
14	A body cooler able to contain a maximum of 50 should be laid-out with telescoping rack system and lift apparatus adjacent to the autopsy room.	Programming Discussion	County & HOK
15	Distinction between clean and dirty areas must be established. PPE, write-up stations, gowning and general storage will be clean.	Programming Discussion	County & HOK
16	Full body x-ray with scanning arm will be required adjacent to autopsy suite with bed-wide door access. Paraffin block sample storage may be required nearby. (TBD)	Programming Discussion	County & HOK
17	A freezer for long-term tissue storage is required. (TBD)	Programming Discussion	County & HOK
18	A separate cooler may be provided for the decomposition/isolation room	Programming Discussion	County & HOK
19	A method to render tissue from bone should be provided in the decomposition room.	Programming Discussion	County & HOK
20	The intake area must provide for: funeral home drop-off, canopy covered OH door access, log-in, documentation, secure medicine storage, floor scale, gurney(s), toilet room, hose and floor drain, all within a space secure from the outside with secured internal access into ME operations area supervised by CCTV.	Programming Discussion	County & HOK
21	An additional cooler may be required in the intake area to allow off hours receipt and temporary storage.	Programming Discussion	County & HOK
22	No biohazard effluent is anticipated from this	Programming Discussion	County &





# Meeting Notes

	facility.		HOK
23	The County desires 25 parking spaces for vehicles they anticipate on site.	Programming Discussion	County & HOK
24	Access to gender specific toilets, showers and lockers should be located so staff can flow from the clean/office side through lockers, showers and gowning en route to and from their work areas.	Programming Discussion	County & HOK
25	Flat and smooth floor should be anticipated everywhere gurneys are in use. Acceptable finishes (floor, wall and ceiling) will be discussed as part of project development.	Programming Discussion	County & HOK
	End of Meeting Notes		

Please submit requests for corrections or additions to these notes to Name by 2 November.



# Meeting Notes

3200 Southwest Freeway, Suite 900  
 Houston, TX 77027 USA  
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Project Medical Examiner Relocation Study  
 Client Galveston County  
 Date Prepared October 30, 2015  
 Project Number 15-10073-00  
 File D4.1

Meeting Location Galveston ME Offices Meeting Time/Date 1:00-3:00 October 28, 2015  
 Prepared By David Reese Meeting Purpose Programming Workshop  
 Participants Galveston ME: Dr. Erin Barnhart

HOK: Neil Bustamante, David Reese  
 Tim OConnell, Jack Baker

Copies To: file

Purpose of the meeting was to begin high level programming aimed at defining space types, associated sizes, and special functional and environmental conditions that will affect ME function, project scope, and ultimate costs.

Item	Discussion	Recommendation/Action	Action By
1	The meeting was defined to include Programming discussions, identification of issues that impact both scope and costs, and scheduling of the next meeting.		
2	Impactful issues were defined as things like: BOD concerns, credentialing expectations, space environmental conditions, MEP support systems, COOP planning, emergency power, and future expansion.		
3	A draft of meeting notes from the 10/22 kickoff session was used to prompt clarifications leading to a Program of Spaces	HOK will summarize meeting outcome in a preliminary space list, room sizes and block diagram layout options for review.	HOK
4	Previous notes about a secure entry and reception functions prompted a question about security, threat assessment, and possible AFTP measures.	It was agreed that lobby functions previously identified would be secure from the outside and have secure access into ME operations. There is no specific threat assessment or any AFTP measures expectations.	HOK
5	Lacking specific threat assessment or protection guidelines it was recommended that the Chief reach-out to police and first responders in the area to determine anticipated support and response times.	Galveston ME will contact local law enforcement and first responders to understand capabilities and potential response times to a range of emergency scenarios.	County ME
6	In addition to the (3) administrative workstations and (1) administrative office adjacent to and secure from the entry lobby, the number and size of the investigator's office was discussed.	While the office may be 100-120 NSF in size it will be adjacent to a small conference room where visiting investigators can touchdown for temporary assignments.	HOK
7	One large conference room able to contain a digital microscope and 12 staff will be located in the administrative area for training.	Training head count is TBD.	HOK



## Meeting Notes

Page 2 of 3

8	It was confirmed that 5 Doctor's offices of 120 NSF with book shelves and file cabinets will be provided. In addition one Chief office of 160 NSF will be provided to contain office furniture, a small conference table, book shelves and file cabinets. Each of the six doctor offices will provide space for a new microscope to be selected by GCME.	HOK will develop preliminary office layouts to illustrate potential furniture configuration for team discussions. Natural light will be provided as much as possible throughout the administrative and morgue spaces as is financially feasible.	HOK
9	Technician Workstations (3-5 near morgue/autopsy suites) of approximately 35-45 NSF were discussed pending analysis of space availability.	HOK will conduct preliminary evaluations of layout configurations for review.	HOK
10	Storage requirements were provided by the County ME including ten different categories, some of which could be combined with Wet Tissue storage adjacent to the morgue.	Wet Tissue, Evidence, DNA and Histology will be considered for combination as part of the initial design layout. Confirm freezer temperature.	County & HOK
11	Drying Room options were discussed including pre-fabricated units, built-in units with epoxy floor and a dedicated room designed to promote proper drying.	HOK will propose options for consideration as part of the layout.	HOK
12	Six locations were confirmed for autopsy in the morgue with four installed initially leaving two future locations available. Each will have provision for "SMART Boards" and a ceiling mounted power cord reel to supply autopsy power tools needs.	Grossing workstations to have sinks, robust disposals, suspended gravity scales (not electronic) over the sinks, side boards for tissue and organ dissection, and abundant natural light. Surgical lights may be specified with a camera pending budget analysis.	County & HOK
13	A decomposition room will be provided with access to all morgue services.	No embalming, no cremation and no digesting of tissue is anticipated.	County & HOK
14	A body cooler able to contain a maximum of 50 should be laid-out with wall rack system and lift apparatus for approximately 25 and adequate floor space for approximately 25 tables adjacent to the autopsy room.	The body cooler is to maintain a temperature of 55-60 degrees Fahrenheit. Enclosed storage units (one or more) in the cooler may be used for decomposing bodies to control odor.	County & HOK
15	Distinction between clean and dirty areas was discussed. PPE, write-up stations, gowning and general storage will be clean. Office staff will be separated from "dirty" areas	Office space and clean areas will have dedicated supply HVAC that does not contain recirculated air from any dirty areas.	County & HOK
16	Full body x-ray and CT scanning options will be investigated for location adjacent to autopsy suite with bed-wide door access.	Discussion included the option of purchasing these pieces of equipment used as investigated by HOK SME.	County & HOK
17	A 1,100 Cubic Freezer for long-term tissue storage is required.	Location TBD	County & HOK
18	A separate cooler may be provided for the decomposition/isolation room	Location and size TBD	County & HOK
19	The intake area must provide for: off hours drop-off, canopy covered OH door access, log-in, documentation, secure medicine storage, floor scale, gurney(s), access to cooler, toilet room, hose and floor drain, all within a space secure from the outside with secured internal access into ME operations area supervised by CCTV.	HOK to investigate possible layouts.	County & HOK



# Meeting Notes

20	Discussions included objectives of a Continuation of Operations Plan (COOP) to be developed by the GCME especially as it relates to continued operations of the building during emergency conditions and prolonged outages.	GCME will investigate previous planning and advise HOK their requirements for operating conditions acceptable throughout emergencies that deny the facility its typical services.	County & HOK
21	Additional discussion included the concept of redundancy and reliability of critical systems and services. HOK recommended the consideration of N+1 redundancy for critical systems to allow uncompromised operation during equipment failures or maintenance outages.	HOK suggested consideration be given to three units, each able to supply 50% of projected loads so that one unit could be out-of-service while two others in the same system will continue to meet 100% of operating expectations. Application of this redundancy is TBD.	County & HOK
	End of Meeting Notes		

Please submit requests for correction-of or additions-to these notes to David Reese by 9 November.







10. Re-scope of underground utilities to investigate and advise
  - a. Currently building has 4" cast iron waste lines. These will need to be upgraded to match the 6" main line near property line.
  - b. Design team to plan for 6" waste lines.
11. The ME will investigate who within the County is responsible for IT/Telecom system infrastructure.
12. The roof will be replaced.
  - a. Galveston has requested Garland Modified Bitumen roof with cap sheet.
13. Fall protection will be required where parapets are absent.
  - a. This system could be a cable system, a skylight addition, or newly constructed wall/parapet system pending future design.
14. Western entry ramp, stairs and patio to be demolished and replaced with a more modest entry.
15. HOK will provide an estimate format and equipment list for Dr. Barnhart to review before final cost estimate is prepared. This list is to ensure appropriate equipment is include in a combined cost estimate.
16. December 8<sup>th</sup> Galveston Court will meet to review to-date Feasibility Study results at 1:30 PM.
17. November 24<sup>th</sup> Galveston County and Dr. Barnhart will meet to review the preliminary design.
  - a. HOK to assist Dr. Barnhart and County with the following presentation materials:
    - i. Presentation boards of current schematic plan
    - ii. Estimate
    - iii. Narrative
    - iv. Basis of design
    - v. and explanation of why new spaces are required.