

**CALIFORNIA FIRE CHIEFS ASSOCIATION**  
NORTHERN CALIFORNIA FIRE PREVENTION OFFICERS  
FIRE SERVICE EDUCATION COMMITTEE

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**CLINICS AND HOSPITAL REVIEW & INSPECTION**  
(0.8 CEUs / ICC Contact Hours)

► **Instructors:** **Nanci Timmins** – OSHPD Chief Fire & Life Safety Officer and former FM for the State of Michigan  
**Gary Dunger** - Business Process Manager and eServices Manager for OSHPD

► **Available in 2 Locations** (select one):     **Foster City** |     **Roseville**

Option 1 – <b>Foster City</b>	Option 2 - <b>Roseville</b>
Date: June 8 <sup>th</sup> , 2017	Date: June 7 <sup>th</sup> , 2017
Location: Foster City Fire Department 1040 East Hillsdale Blvd., Foster City, 94404	Location: Maidu Community Center 1550 Maidu Dr., Roseville, 95661

► **Time: 10:00 – 16:00 (registration begins at 0930 hours)**

**Course Description:** Clinics fall under the jurisdiction of the local building and fire departments; however the regulations that apply to most of these facilities – but not all – are written by OSHPD and are quite complex. While local ordinances can be enforced and fees collected, fire departments and building departments must certify the clinic is in compliance with the OSHPD 3 provisions of the California Building Codes Standards at occupancy. This class will provide the attendee information relating to clinic construction requirements, occupancy classification, OSHPD 3 certification as well as the fire department’s role and responsibility in healthcare facility inspection.

► **What to bring:**  
2016 Edition of the California Building Code

**PRE-REGISTRATION REQUIRED!**

► **Cost:** **\$125.00** for NorCal FPO/Calbo Members [4418] | **\$150.00** for Non-Members [4418]

**Registration Information:**

**NorCal/CalBO Member** (Check one):     **Yes** |     **No**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Payment Information:**

**Total amount:** \$ \_\_\_\_\_ [4437]

Credit Card (Check one):     **MasterCard**     **Visa**    |     **Check** (Payable to NorCal FPO) # /PO# \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp.Date: \_\_\_\_\_ VCode: \_\_\_\_\_

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City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Mail to: Northern California Fire Prevention Officers (NorCal FPO)  
950 Glenn Drive, Suite 150, | Folsom, CA 95630

Or Call: 916.442.0307 | Fax: 916.932.2209 | Email: [info@firepreventionofficers.org](mailto:info@firepreventionofficers.org)