



REQUIREMENTS FOR GROUP R DIVISION 3.1 RESIDENTIAL CARE FACILITIES

Group R Division 3.1: Facilities licensed by a governmental agency for a residentially-based 24-hour care facility providing accommodations for *six or fewer ambulatory, non-ambulatory, or bedridden clients* of any age. (CBC 310.4.1 – 2019 Ed.)
(Also see Section 435, *Special Provisions For Licensed 24-Hour Care Facilities in a Group R-2.1, R-3.1, R-4 Occupancy.*)

- Apply to the State of California Community Care Licensing Division.
- Compliance with all City of Fremont Building, Electrical, Fire, Mechanical, Plumbing, and Zoning Codes is required. For Building Permit information please phone 510-494-4443.
- **Building Height and area provisions** – Group R-3.1 shall be constructed in accordance with Table 503. In Group R-3.1 occupancies where non-ambulatory clients are housed above the first story, having more than two stories in height or having more than 3,000 square feet of floor area above the first story shall not be less than 1-hour fire resistance rated construction throughout. In Group R-3.1 occupancies housing a bedridden client, the client sleeping room shall not be located above or below the first story. (California Building Code (CBC) 435.3 – 2019 Ed.)
- **Address identification numbers** shall be placed in a position that is plainly legible and visible from the street or road fronting the property. Address numbers shall contrast with their background and shall be sufficiently illuminated for viewing at night. Illumination may be either internal or external. In no case shall the numbers be less than 4 inches in height. Where access is by means of a private road and the building cannot be viewed from the public way, a monument, pole or other sign or means shall be used to identify the structure. Address numbers shall be maintained. (California Fire Code (CFC) 505.1 – 2019 Ed.)
- **Egress arrangements, Exits** - Minimum of two – Exits shall be maintained in accordance with the California Fire Code. The accessible means of egress are a continuous and unobstructed way of egress travel from any accessible point in a building or facility to a public way. Exits and non-ambulatory client bedroom doors shall be a minimum of three feet wide by 6 feet eight inches high, provide a 32 inch clear opening, and open 90 degrees. Exits shall not pass through kitchens, storerooms, closets, garages or spaces used for similar purposes and a means of exit shall not pass through more than one intervening room. *Exception:* Kitchens that do not form separate rooms by construction. (CBC 435.8.2.1; 435.8.3.4; 1002.1 and Chapter 2; CFC Chapter 10)
- **Bedrooms used by non-ambulatory clients** shall have access to at least one of the required exits which shall conform to one of the following: (CBC 435.8.3.2)
 - Egress through a hallway or area into a bedroom in the immediate area which has an exit directly to the exterior and the corridor/hallway is constructed consistent with the dwelling unit interior walls. The hallway shall be separated from common areas by a solid wood door not less than 1-3/8 inch in thickness, maintained self-closing or shall be automatic closing by actuation of a smoke detector installed in accordance with CBC section 716.2.6.
 - Egress through a hallway which has an exit directly to the exterior. The hallway shall be separated from the rest of the house by a wall constructed consistent with the dwelling unit interior walls and opening protected by a solid wood door not less than 1-3/8 inch in thickness, maintained self-closing or shall be automatic closing by actuation of a smoke detector installed in accordance with CBC section 716.2.6.
 - Direct exit from the bedroom to the exterior shall be of a size as to permit the installation of a door not less than 3 feet in width and not less than 6 feet 8 inches in height. When installed, doors shall be capable of opening at least 90 degrees and shall be so mounted that the clear width of the exit way is not less than 32 inches.
 - Egress through an adjoining bedroom which exits to the exterior.

- **In Group R-3.1 occupancies housing only one bedridden client and not provided with an approved automatic sprinkler system, all of the following shall apply:** (CBC 435.8.3.3)
 - A direct exit to the exterior of the residence shall be provided from the client sleeping room.
 - Doors to a bedridden client's sleeping room shall be of a self-closing, positive latching 1-3/8 inch solid wood door. Such doors shall be provided with a gasket so installed as to provide a seal where the door meets the jam on both sides and across the top. Doors shall be maintained self-closing or shall be automatic closing by actuation of a smoke alarm in accordance with Section 716.5.9.
 - Shall not have a night latch, dead bolt, security chain or any similar locking device installed on any interior door leading from a bedridden client's sleeping room to any interior area such as a corridor, hallway and/or general use areas of the residence in accordance with Chapter 10.
 - The exterior exit door to a bedridden client's sleeping room shall be operable from both the interior and exterior of the residence.
 - Every required exit doorway from a bedridden client's sleeping room shall be of a size as to permit the installation of a door not less than 3 feet in width and not less than 6 feet 8 inches in height. When installed in exit doorways, exit doors shall be capable of opening at least 90 degrees and shall be so mounted that the clear width of the exit way is not less than 32 inches.
 - **Note:** A sliding glass door can be used as an exterior exit doorway as long as it is operable from the inside and outside and the clear width of the exit way is not less than 32 inches.

- **Intervening Rooms.** A means of exit shall not pass through more than one intervening room. A means of egress shall not pass through kitchens, storerooms, closets, garages or spaces used for similar purposes. Exception: Kitchens which do not form separate rooms by construction. (CBC 435.8.3.4)

- **Emergency Escape and Rescue Opening** is an operable window, door or other similar device that provides for a means of escape and access for rescue in the event of an emergency. In addition to the means of egress required by Chapter 10, basements and sleeping rooms shall have at least one exterior emergency escape and rescue opening. Such openings shall open directly into a public way or to a yard or court that opens to a public way. Such openings are not required from basements or sleeping rooms that have an exit door or exit access door that opens directly into a public way or to a yard, court or exterior exit balcony that opens to a public way. Emergency escape and rescue openings shall have a minimum net clear opening of 5.7 square feet (Exception: The minimum net clear opening for grade-floor emergency escape and rescue openings shall be 5 square feet). The minimum net clear opening height dimension shall be 24 inches. The minimum net clear opening width dimension shall be 20 inches. The net clear opening dimensions shall be the result of normal operation of the opening. Emergency escape and rescue openings shall have the bottom of the clear opening not greater than 44 inches measured from the floor. Emergency escape and rescue openings and any exit doors shall be maintained free of any obstructions, unless allowed by Section 1029, and be operational from the inside of the room without the use of keys or tools. Bars, grills, grates or similar devices are permitted to be placed over emergency escape and rescue openings provided the minimum net clear opening size complies with Section 1029.2 and such devices shall be releasable or removable from the inside without the use of a key, tool, or force greater than that which is required for normal operation of the escape and rescue opening. Where such bars, grilles, grates or similar devices are installed in existing buildings smoke alarms shall be installed in accordance with Section 907.2.11 regardless of the valuation of the alteration. The release mechanism shall be maintained operational at all times. Such bars, grills, grates or any similar devices shall be equipped with an approved exterior release device for use by the fire department as required by the authority having jurisdiction. A building permit is required for the installation of all bars, grills, grates or similar devices. (CBC 105, 1002.1, and 1030)

- **Corridor/Hallway Widths** – Corridors serving an occupant load of 10 or less shall not be less than 36 inches in width. (CBC 425.8.4.2 Exception #1)

- **Changes in level** – In Group R-3.1 occupancies housing non-ambulatory clients interior changes in level up to 0.25 inch may be vertical and without edge treatment. Changes in level between 0.25 inch and 0.5 inch shall be beveled with a slope no greater than 1 unit vertical in 2 units horizontal (50 percent slope). Changes in level greater than 0.5 inch shall be accomplished by means of a ramp. (CBC 435.8.5)

- **Exterior ramps** – California Building Code provisions related to accessibility require exterior ramps be approved under benefit of a building permit. For further information regarding exterior ramps required for accessibility or used as a part of a means of egress system please contact City of Fremont Development Services Center, 39550 Liberty St., First Floor, Fremont, CA, 94538, 510-494-4443. (CBC 105, 1012, 1027, and 1114A)
- **Locks and Latches** – Doors from individual dwelling or sleeping units of Group R occupancies having an occupant load of 10 or less are permitted to be equipped with a night latch, dead bolt or security chain, provided such devices are openable from the inside without use of a key or tool. (CBC 1010.1.9.4 #4)
- **Fences and gates.** Grounds of a Residential Care Facility for the Elderly serving Alzheimer clients may be fenced and gates therein equipped with locks, provided safe dispersal areas are located not less than 50 feet from the buildings. Dispersal areas shall be sized to provide an area of not less than 3 square feet per occupant. Gates shall not be installed across corridors or passageways leading to such dispersal areas unless they comply with egress requirements. (CBC 435.8.8)
- **Floor Separation** - Group R-3.1 occupancies with non-ambulatory clients housed above the first floor shall be provided with a nonfire resistance constructed floor separation at stairs which will prevent smoke migration between floors. Such floor separation shall have equivalent construction of ½-inch (12.7 mm) gypsum wallboard on one side of wall framing. Doors within such floor separations shall be tight fitting solid wood at least 1 3/8 inches in thickness. Such doors shall be positive latching, smoke gasketed, and shall be automatic closing by smoke detection. (CBC 435.8.7)

EXCEPTIONS:

1. Occupancies with at least one exterior exit from floors occupied by clients.
 2. Occupancies provided with an automatic fire sprinkler system complying with Chapter 9.
- **Exit Plan** - An approved 8 ½” x 11” exit plan must be posted and 911 stickers affixed on or near a landline telephone. The plan shall include the floor plan of the dwelling; all exit paths from the interior to the public way, exit doors, gates, emergency escape and rescue windows, and directional arrows showing the direction of exit travel.
 - **Limitations** – six or less clients – In Group R-3.1 occupancies where non-ambulatory clients are housed above the first story, having more than two stories in height or having more than 3,000 square feet of floor area above the first story shall not be of less than 1-hour fire-resistance-rated construction throughout. In Group R-3.1 occupancies housing a bedridden client, the client sleeping room shall not be located above or below the first story. (CBC 435.3.2)

EXCEPTION: Temporarily Bedridden - Clients who become bedridden as a result of a temporary illness as defined in Health and Safety Code Sections 1566.45, 1568.0832 and 1569.72. A temporary illness is an illness that persists for 14 days or less. A bedridden client may be retained in excess of the 14 days upon approval by the Department of Social Services and may continue to be housed on any story in a Group R-3.1 occupancy classified as a licensed residential facility. Every licensee admitting or retaining a bedridden resident shall, within 48 hours of the resident’s admission or retention in the facility, notify the local fire authority with jurisdiction of the estimated length of time the resident will retain his or her bedridden status in the facility.

- **Smoking is prohibited at health care facilities and family day care homes.** Smoking means (1) inhaling, exhaling, burning or carrying any lighted pipe, cigar, cigarette, hookah pipe, water pipe, or similar article of any kind or (2) the use of an electronic cigarette. “No Smoking” signs, with letters of not less than one inch in height, or the international “No Smoking” symbol (consisting of a pictorial representation of a burning cigarette enclosed in a red circle with a red bar across it), or the same information in another format approved by the city manager, shall be clearly, sufficiently and conspicuously posted outside every building or other place where smoking is prohibited by this chapter, including outdoor areas, by the owner, operator, manager or other person having control of such building or other parts. “No Smoking within 25 feet” signs shall be conspicuously posted at every entrance or exit to any building where smoking is prohibited. (Fremont Municipal Code Chapter 8.55)

- **Private garages and carports** shall not be converted to dwelling or habitable use without required permits. Private garage use is limited to the parking of motor vehicles and approved accessory uses such as laundry facilities and orderly storage not occupying required parking areas. Rafter, loft or attic storage is not permitted without proper building permits. Floor surfaces shall be of approved noncombustible paving materials. Openings between a motor-vehicle related occupancy and a room used for sleeping purposes shall not be permitted. The private garage shall be separated from the dwelling unit and its attic area by means of gypsum board, not less than ½-inch in thickness, applied to the garage side. Garages beneath habitable rooms shall be separated from all habitable rooms above by not less than a 5/8-inch Type X gypsum board or equivalent and ½-inch gypsum board applied to structures supporting the separation from habitable rooms above the garage. Door openings between a private garage and the dwelling unit shall be equipped with either solid wood doors or solid or honeycomb core steel doors not less than 1-3/8 inches in thickness, or doors in compliance with Section 716.5.3 with a fire protection rating of not less than 20 minutes. Doors shall be self-closing and self-latching. Ducts in a private garage and ducts penetrating the wall or ceilings separating the dwelling unit, including the attic area, from the garage shall be constructed of sheet steel of not less than 0.019 inches in thickness, and shall have no openings into the garage. (CBC 105, 406.2.5 and 406.3).
- **Combustible materials** – A person shall not utilize or allow to be utilized, an open flame in *Group R-3.1 occupancies or any Licensed Care Facilities*. All outside storage of combustible materials shall be setback 10 feet from property lines. Storage may be reduced to 3 feet from property lines if storage height does not exceed 6 feet. Combustible materials storage in buildings shall be maintained 2 feet or more below the ceiling in non-sprinklered areas. Storage shall be maintained 18 inches or more below fire sprinkler deflectors. Attic, under-floor and concealed spaces used for storage shall be protected on the storage side as required for 1-hour fire-resistance-rated construction. Openings shall be protected by assemblies that are self-closing and are of noncombustible construction or solid wood core not less than 1-3/4 inches in thickness. Storage shall not be placed on exposed joists. Storage is not permitted in exits or equipment rooms. **Vegetation** capable of being ignited and endangering property shall be cut down and removed by the owner or occupant of the premises. **Combustible waste material** shall be kept in approved containers, removed from the building daily and from the property at least once per week. **Oily rags** and similar materials susceptible to spontaneous ignition shall be stored in listed disposal containers. Contents of the listed containers shall be removed and disposed of daily. Maintain approved clearance between ignition sources, such as light fixtures and heaters. **Extension cords** shall not be a substitute for permanent wiring. (CFC 304, 305, 308.5, 315, 604.5, and California Code of Regulations, Title 19, Division 1, Chapter 1, sec. 3.07.)
- **Fire Extinguisher** – Provide one fire extinguisher with a minimum classification of 2A:10BC. Securely mount the extinguisher in an approved conspicuous and unobstructed location, and no portion of the extinguisher is lower than 4" off the floor nor higher than 5 feet from the floor. The extinguisher shall be serviced by a licensed fire extinguisher company annually with a State Fire Marshal Annual Service Tag affixed to the extinguisher. (CFC 906.1 through 906.7; Title 19, Division 1, Chapter 3, Sections 565(a) and 567.7 *Selection and Distribution of Portable Fire Extinguishers*.)
- **Automatic Fire Sprinkler Systems** shall be installed throughout all buildings in a Group R fire area (CBC 903.2.8)

EXCEPTIONS:

1. Existing Group R-3 occupancies converted to Group R-3.1 occupancies not housing bedridden clients, not housing non-ambulatory clients above the first floor, and not housing clients above the second floor.
2. Existing Group R-3 occupancies converted to Group R-3.1 occupancies housing only one bedridden client and complying with section 435.8.3.3.
3. Pursuant to Health and Safety Code Section 13113 occupancies housing ambulatory children only, none of whom are mentally ill children or children with intellectual disabilities, and the buildings or portions thereof in which such children are housed are not more than two stories in height, and buildings or portions thereof housing such children have an automatic fire alarm system activated by approved smoke detectors.
4. Pursuant to Health and Safety Code Section 13143.6 occupancies licensed for protective social care which house ambulatory clients only, none of whom is a child (under the age of 18 years), or who is elderly (65 years of age or over.)

- **Smoke Alarm Locations** – Single- or multiple-station smoke alarms shall be installed and maintained regardless of the occupant load at all of the following locations: (CBC 907.2.10.2)
 1. On the ceiling or wall outside of each separate sleeping area in the immediate vicinity of bedrooms.
 2. In each room used for sleeping purposes.
 3. In each story within a dwelling unit, including a basement, but not including crawl spaces and uninhabitable attics. In dwellings or dwelling units with split levels and without an intervening door between the adjacent levels, a smoke alarm installed on the upper level shall suffice for the adjacent lower level provided that the lower level is less than one full story below the upper level.
 4. In a Group R-3.1 occupancies, in addition to the above, smoke alarms shall be provided throughout the habitable areas of the dwelling unit except kitchens.

- **Smoke Alarm Installation, Testing, and Maintenance** – (CBC 907.2.10.2.3)
 1. Smoke alarms shall be installed, tested and maintained in accordance with the manufacturer’s instructions, the U.L. Listing, the 2019 California Building Code and California State Fire Marshal regulations. (KEEP MANUFACTURER’S INSTRUCTIONS AVAILABLE FOR INSPECTION)
 2. Smoke alarms that no longer function shall be replaced. Smoke alarms shall be replaced after 10 years from the date of manufacture marked on the unit, or if the date of manufacture cannot be determined.

- **Smoke Alarms in facilities housing a bedridden client** – (CBC 907.2.10.2.2)

Smoke alarms shall receive their primary power from the building wiring when such wiring is served from a commercial source and shall be equipped with a battery backup. Smoke alarms shall be electrically interconnected so as to cause all smoke alarms to sound a distinctive alarm signal upon actuation of a single smoke alarm. Such alarm signal shall be audible throughout the facility at a minimal level of 15 db above ambient noise level. These devices need not be interconnected to any other fire alarm device, have a control panel, or be electrically supervised or provided with emergency power.

- **Smoke Alarm Interconnection** – (CBC 907.2.10.5)

Where more than one smoke alarm is required to be installed the smoke alarms shall be interconnected in such a manner that the activation of one alarm will activate all of the alarms in the dwelling unit. Physical interconnection of smoke alarms shall not be required where listed wireless alarms are installed and all alarms sound upon activation of one alarm. The alarm shall be clearly audible in all bedrooms over the background noise levels with all intervening doors closed.

- **Smoke Alarm Power Source** – (CBC 907.2.10.6)

Smoke alarms in newly classified Group R-3.1 occupancies shall receive their primary power from the building wiring where such wiring is served from a commercial source and shall be equipped with a battery backup. Smoke alarms with integral strobes that are not equipped with battery backup shall be connected to an emergency electrical system. Smoke alarms shall emit a signal when the batteries are low. Wiring shall be permanent and without a disconnecting switch other than as required for overcurrent protection.

- **Fire Alarms – Groups R-2.1, R-3.1 and R-4.** (CBC 907.5.2.3.4)

Protective social care facilities which house persons who are hearing impaired, shall be provided with notification appliances for the hearing impaired installed in accordance with NFPA 72 and which shall activate upon initiation of the fire alarm system or the smoke alarms.

 - **Definition of Protective Social Care:** The housing and care of any person of any age when such person is referred to or placed within such home or facility for care and supervision services by any governmental agency.

- **Carbon Monoxide Detection - Where required.** (CFC 915.1.1) Carbon monoxide detection shall be provided in R occupancies in the locations specified in Section 915.2]

- **Carbon Monoxide Detection – Location.** Carbon monoxide detection shall be installed *in accordance with the manufacturer’s published instructions* in the locations specified in Sections 915.2.1 through 915.2.3 (CFC 915.2)

- **Dwelling Units.** Carbon monoxide detection shall be installed in dwelling units in the *following locations:* (CFC915.2.1)
 1. Outside of each separate sleeping area in the immediate vicinity of the bedrooms.
 2. *On every occupiable level of a dwelling unit, including basements.*
 3. Where a fuel-burning appliance is located within a bedroom or its attached bathroom, carbon monoxide detection shall be installed within the bedroom.

Preinspection Fees – Health and Safety Code 13235(a) : Upon receipt of a request from a prospective licensee of a community care facility, of a residential care facility for the elderly, or of a child day care facility, the local fire enforcing agency shall conduct a preinspection of the facility prior to the final fire clearance approval. At the time of the preinspection, the primary fire enforcing agency shall provide consultation and interpretation of fire safety regulations, and shall notify the prospective licensee of the facility in writing of the specific fire safety regulations which shall be enforced in order to obtain fire clearance approval. A fee equal to, but not exceeding, the actual cost of the preinspection services may be charged for the preinspection of a facility with a capacity to serve 25 or fewer persons. A fee equal to, but not exceeding, the actual cost of the preinspection services may be charged for a preinspection of a facility with a capacity to serve 26 or more persons.” Currently the Fremont Fire Department charges a preinspection fee of \$148.00. Please remit payment by check payable to the City of Fremont on the date of the inspection. You may request as many preinspections as may be necessary to prepare your facility to receive a fire clearance.

(b) The primary fire enforcing agency shall complete the final fire clearance inspection for a community care facility, residential care facility for the elderly, or child day care facility within 30 days of receipt of the request for the final inspection, or as of the date the prospective facility requests the final preclearance inspection by the State Department of Social Services, whichever is later. *(Amended by Stats. 2009, 4th Ex. Sess., Ch. 12, Sec. 14. Effective July 28, 2009.)*

IMPORTANT: There is no fee charged for a final fire clearance inspection. Final fire clearance inspections are pass/fail inspections. Passing a final fire clearance inspection will result in the granting of a fire clearance. Failing a final fire clearance inspection may result in the denial of a fire clearance. Therefore, it is highly recommended that your facility request as many preinspections as necessary to ensure passing the final fire clearance inspection.

When the above requirements are completed, including issuance and final inspection of any required building permits, and you are ready to schedule your Fire Safety Clearance Inspection, please call the Fremont Fire Prevention Bureau at 510-494-4280 and you will be connected with your district fire inspector.



Values

Integrity / Cooperation / Professionalism / Dedication / Leadership / Respect

Vision Statement

“Building upon a legacy of excellence and leadership”

Mission Statement:

“To prevent and minimize the loss of life and property threatened by the hazards of fire, medical, and rescue emergencies, hazardous materials incidents, and disaster situations within the community.”