



IMC Chapter 4 decides whether a space gets outdoor air by occupancy table, by exhaust, or by a healthcare standard. A schedule that says “OA per code” without occupancy, area, and people is not a calculation.

Original Masterbuild PE packet from Daily Code Talk on 2024 IMC Chapter 4. Confirm the adopted edition. This is not an outdoor-air design. Healthcare follows ASHRAE 170 / IMC 407 — not Table 403 with nicer finishes.

☐ **Occupancy category and area for each ventilated zone — not a single building-wide cfm.**

People outdoor-air rate, area outdoor-air rate, and the resulting breathing-zone outdoor air. System outdoor air can increase after zone air-distribution effectiveness, multiple-zone correction, exhaust makeup, and local amendments.

☐ **Whether ventilation is mechanical, natural, or a combination, and why that method is allowed.**

Intake locations versus exhaust, plumbing vents, loading docks, and kitchen terminations.

☐ **Makeup air for exhaust that is not optional (kitchens, dryers, garages, hazardous processes).**

Controls that keep ventilation running when occupancy assumes it is running.

The fail we see first

Table 403 used as a slogan. Intakes that clear the wall but not the grease exhaust. Healthcare treated as an office.

What to send: occupancy by zone, area, headcount if known, and whether this is a clinic, kitchen, garage, or ordinary office TI.

Send the comments. Not the County guideline.

Folio (does it start with 30?), process or UP number, and the comments PDF. Masterbuild will say which row is actually open.

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+1 (786) 398-6940 · Calendly: 30-minute scoping call

Masterbuild provides engineering services under a written scope. Not an outdoor-air design. Confirm adopted Chapter 4. This is not legal advice.