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APPROVED	DATE	NAME

REVISIONS	
NO.	DATE DESCRIPTION
REV1	
REV2	
REV3	
REV4	
REV5	
REV6	

CLIENT:
VA CENTRAL CALIFORNIA HEALTH CARE SYSTEM

PROJECT:
MENTAL HEALTH 1

NOTE: ALL MEASUREMENTS ARE SUBJECT TO VERIFICATION BY THE CONTRACTOR. NOTIFY AVIAR DESIGN IN THE EVENT OF DISCREPANCIES. ALL PLANS, DRAWINGS AND SPECIFICATIONS ARE THE PROPERTY OF AVIAR DESIGN, AND MAY NOT BE REPRODUCED WITHOUT THE WRITTEN CONSENT OF AVIAR DESIGN.

PROJECT NUMBER:14-002
CREATED ON DATE:1-Apr-14
PLOTTED DATE: 3-Apr-14
SCALE: AS NOTED
DRAWN BY: SME
CHECKED BY:

1 OF 2

LEVEL 1 NEW FURNITURE PLAN - BID



