

Revision	Date

CONSULTANTS:

ARCHITECT/ENGINEERS:

Drawing Title

Project Title

Project Number

Office of Construction and Facilities Management

Approved Project Director

Location

Building Number

Drawing Number

Date

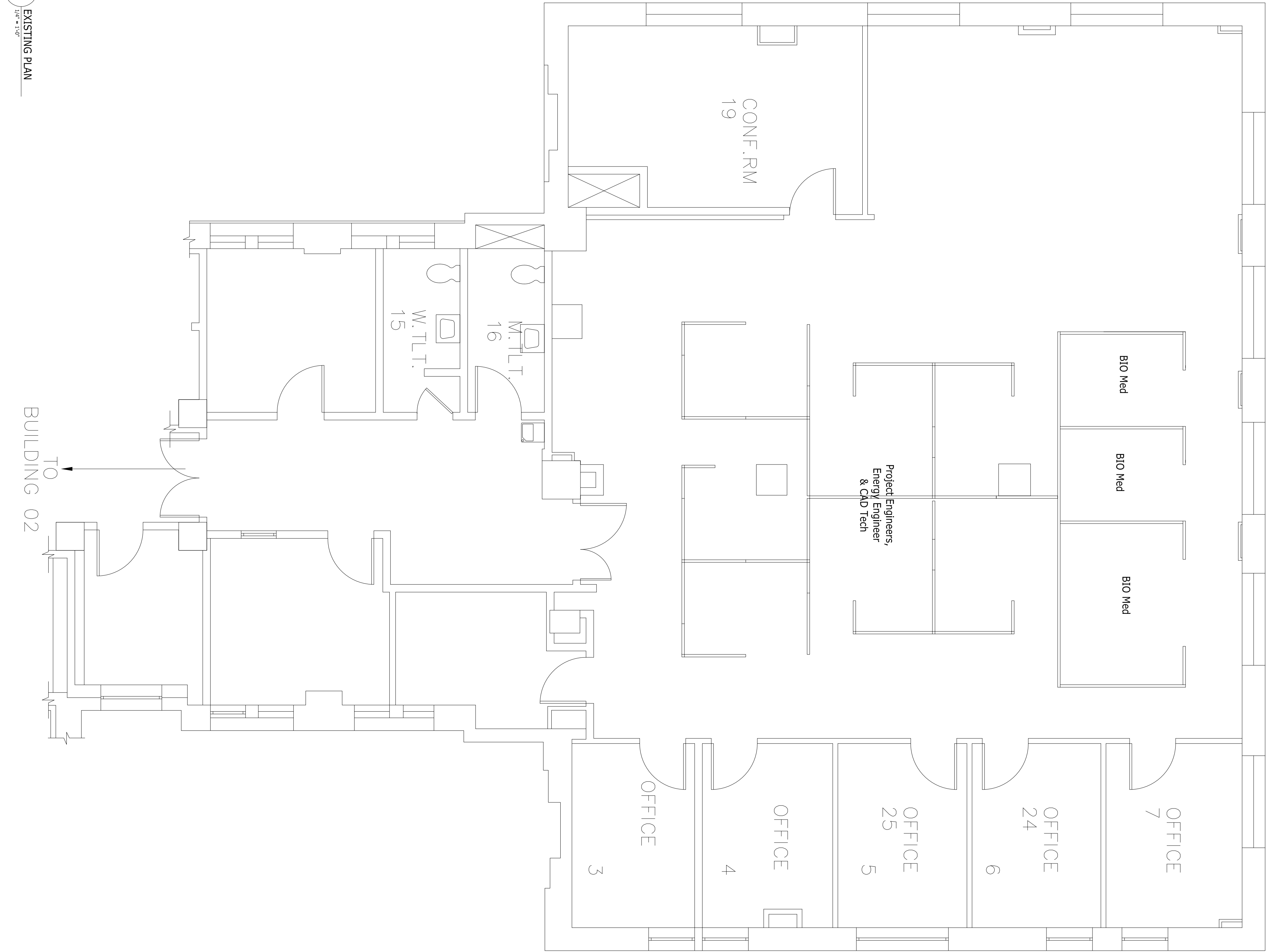
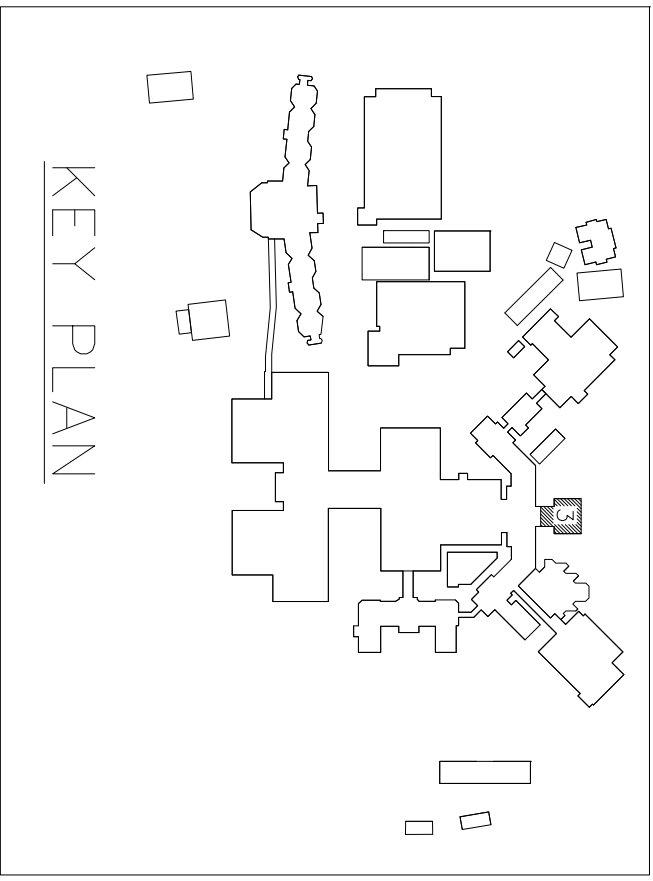
Checked

Drawn

Dwg. 1 of 6

1 EXISTING PLAN

TO BUILDING 02



Scale: 1/4"=1'-0"

