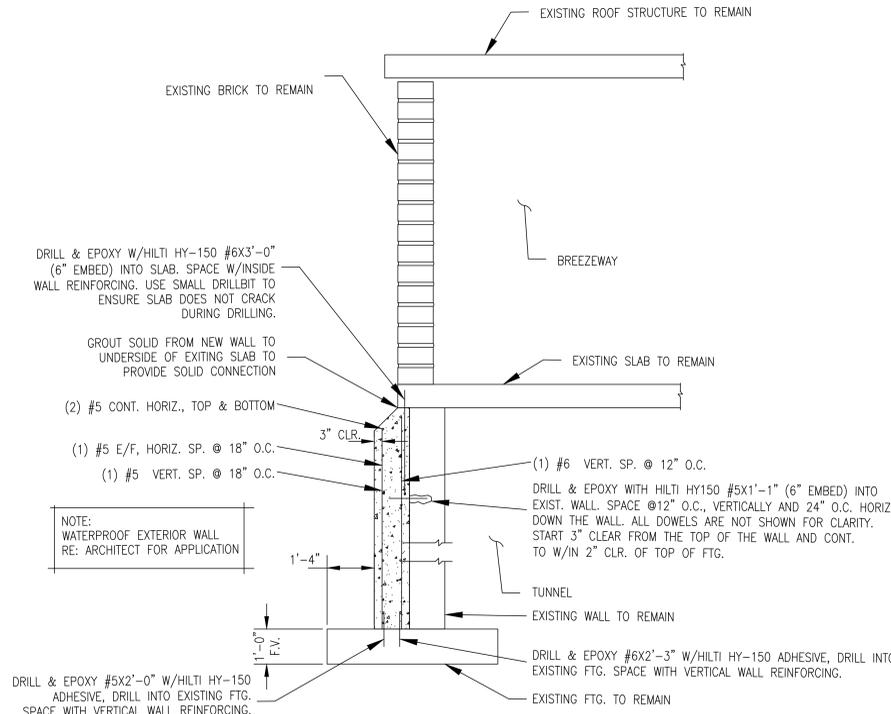
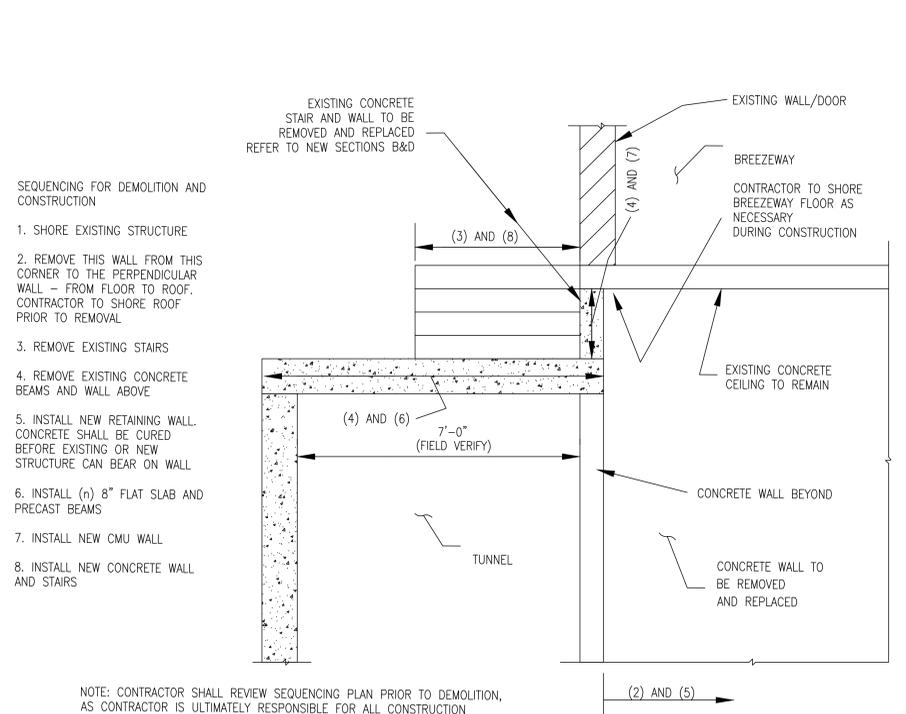


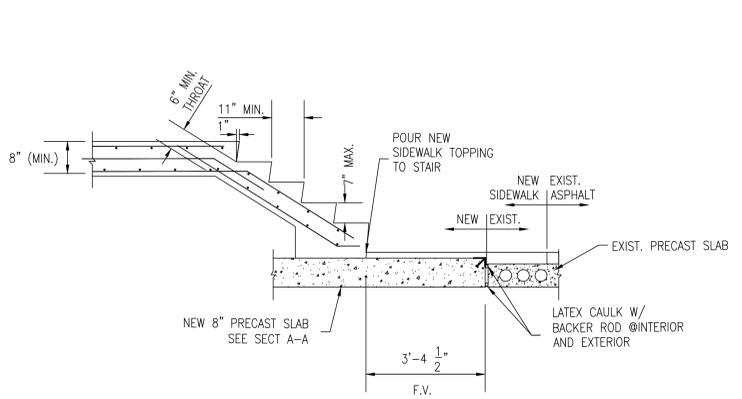
**SECTION A** 1/2" = 1'-0"  
RE: SS1.01



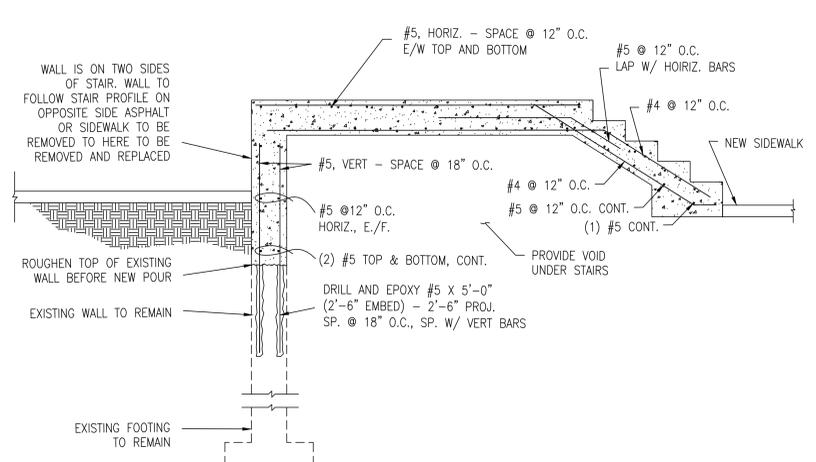
**SECTION B AT NEW RETAINING WALL IN TUNNEL** 1/2" = 1'-0"  
RE: SS1.01



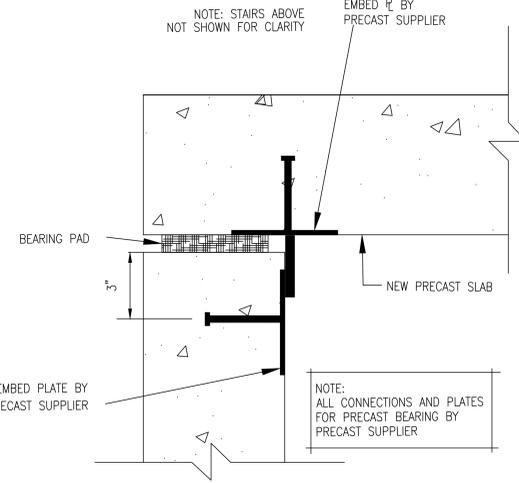
**SECTION C** 1/2" = 1'-0"  
RE: SS1.01 (EXISTING CONDITIONS ONLY)



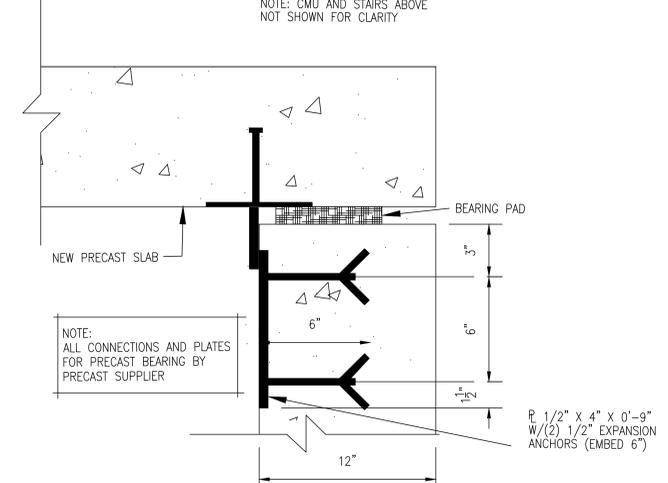
**SECTION D** 1/2" = 1'-0"  
DETAIL OF NEW TO EXISTING JOINT  
RE: SS1.01



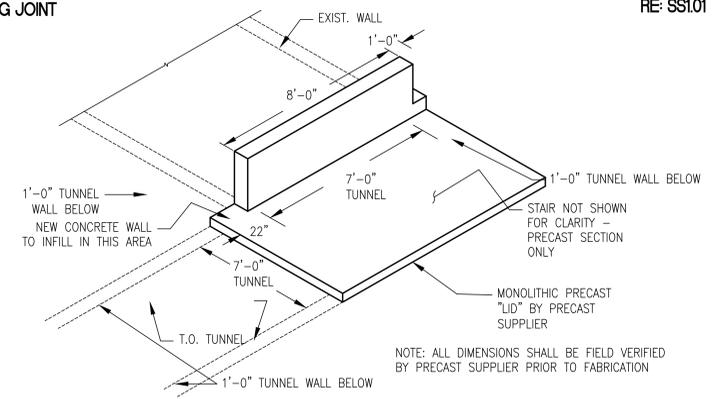
**SECTION E** 1/2" = 1'-0"  
RE: SS1.01



**DETAIL A** 3" = 1'-0"  
RE: SS5.04



**DETAIL B** 3" = 1'-0"  
RE: SS5.04



**SECTION F** NO SCALE

- SEQUENCING FOR DEMOLITION AND CONSTRUCTION
1. SHORE EXISTING STRUCTURE
  2. REMOVE THIS WALL FROM THIS CORNER TO THE PERPENDICULAR WALL - FROM FLOOR TO ROOF. CONTRACTOR TO SHORE ROOF PRIOR TO REMOVAL
  3. REMOVE EXISTING STAIRS
  4. REMOVE EXISTING CONCRETE BEAMS AND WALL ABOVE
  5. INSTALL NEW RETAINING WALL. CONCRETE SHALL BE CURED BEFORE EXISTING OR NEW STRUCTURE CAN BEAR ON WALL
  6. INSTALL (n) 8" FLAT SLAB AND PRECAST BEAMS
  7. INSTALL NEW CMU WALL
  8. INSTALL NEW CONCRETE WALL AND STAIRS
- NOTE: CONTRACTOR SHALL REVIEW SEQUENCING PLAN PRIOR TO DEMOLITION, AS CONTRACTOR IS ULTIMATELY RESPONSIBLE FOR ALL CONSTRUCTION

No	REVISION	DATE

**LHB**  
PERFORMANCE DRIVEN DESIGN.  
LHBcorp.com  
701 Washington Ave. N. Ste 200 | Minneapolis, MN 55401 | 612.338.2029

**TS&C**  
Technical Services & Consulting, LLC

TECHNICAL SERVICES AND CONSULTING  
1225 TOWER AVE  
SUPERIOR, WI 54880  
715-392-1879

I HEREBY CERTIFY that this plan, specification or report was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the State of Minnesota.  
SIGNATURE: *Shamina L. Kratsch*  
TYPED OR PRINTED NAME: SHAMINA L. KRATSCHE  
DATE: 01/23/2015 REG. NO: 50979

APPROVED: SERVICE LINE DIRECTOR	DATE:	APPROVED: INFECTION CONTROL NURSE	DATE:
APPROVED: GENE COORDINATOR	DATE:	APPROVED: PATIENT SAFETY	DATE:
APPROVED: PROJECTS SECTION MANAGER	DATE:	APPROVED: CHIEF OF POLICE	DATE:
APPROVED: DIRECTOR TAG	DATE:	APPROVED: SAFETY MANAGER	DATE:

PROJECT TITLE	SS5-14-247 REPAIR FOUNDATIONS BUILDING 4, 7, 28 St. Cloud VA Health Care System 400 Central St. Cloud, Minnesota	REVISION SCALE AS NOTED
APPROVED: ASSOCIATE HEALTH CARE SYSTEM DIRECTOR	DATE:	PROJECT NO.
APPROVED: CHIEF OF STAFF	DATE:	BUILDING NO. TUNNEL
APPROVED: HEALTH CARE SYSTEM DIRECTOR	DATE:	SLK
		CHECKED BY: JMH
		DRAWN BY: JMH
		DRAWING NO. SS55.04
		DATE: 01/23/2015

**St. Cloud VA Health Care System**  
Brainerd | Montevideo | Alexandria  
MINNESOTA ONE-CALL SYSTEM  
1-800-252-1166  
REQUIRED BY MN STATUTE 216D

**WARNING**  
LOCATION OF ALL UNDERGROUND UTILITIES SHALL BE VERIFIED BY THE CONTRACTOR CALL BEFORE DIGGING.