
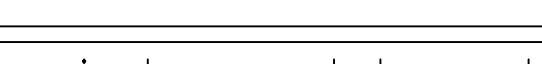


| | | | | | | | | | | | | |
|-----------------------------------|--|---------------------------------|--|-------------------------------------|--|---|--|--------------|-----------------|--|---|--|
| | | Approved: VHSO Facility Manager | | Project Title | | Drawing Title | | | Project Number | | <div>Engineering Service</div> <div>VETERANS HEALTH CARE SYSTEM OF THE OZARKS</div> | |
| UPDATED BY: CGS | | 8/3/15 | | Correct Elevator Deficiencies | | Elevator Location Plan Building 1 | | | 564-16-104 | | | |
| VACATE RADIOLOGY | | MAY13 | | | | | | | Building Number | | | |
| PHARMACY | | MAY12 | | Approved: Engineering Service Chief | | One inch or not to scale! | | Scale: | | ONE (O1) | | |
| Notes and/or Revisions: | | Date | | | |  | | 1/32"= 1'-0" | | Location | | |
| | | | | | | | | | | 1100 N. College Ave., Fayetteville, AR | | |
| | | | | | | | | Checked | | Drawing Number | | |
| | | | | | | | | ELW | | AE101 | | |
| | | | | | | | | Drawn | | Sheet | | |
| | | | | | | | | CGS | | 2 of 6 | | |
| | | | | | | | | Date | | | | |
| | | | | | | | | 19 April 16 | | | | |
| CUSTOM VA FORM 08-6231B, MAY 2012 | | | | | | | | | | | | |