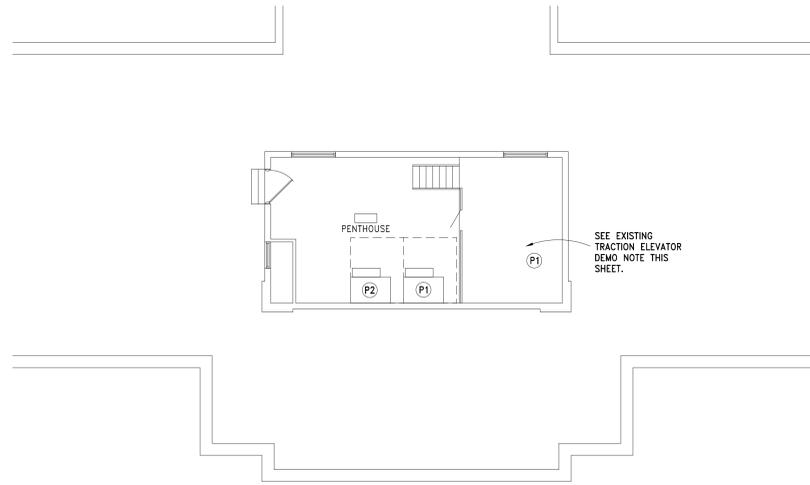
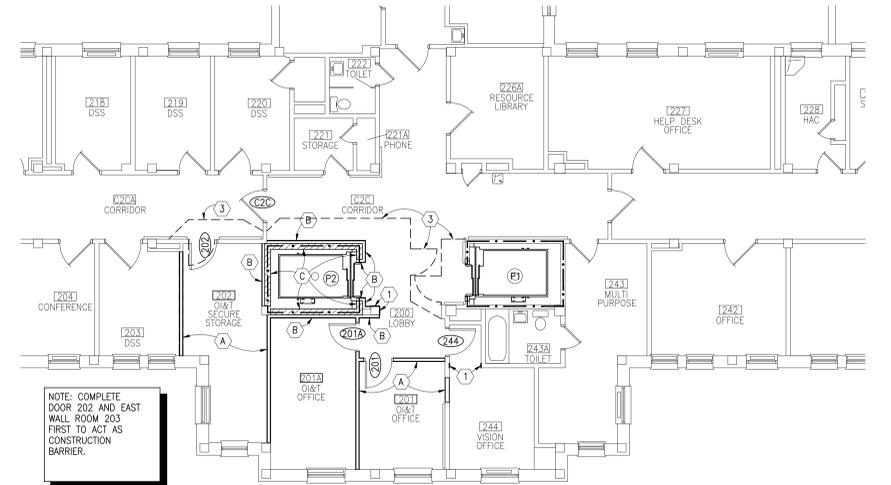


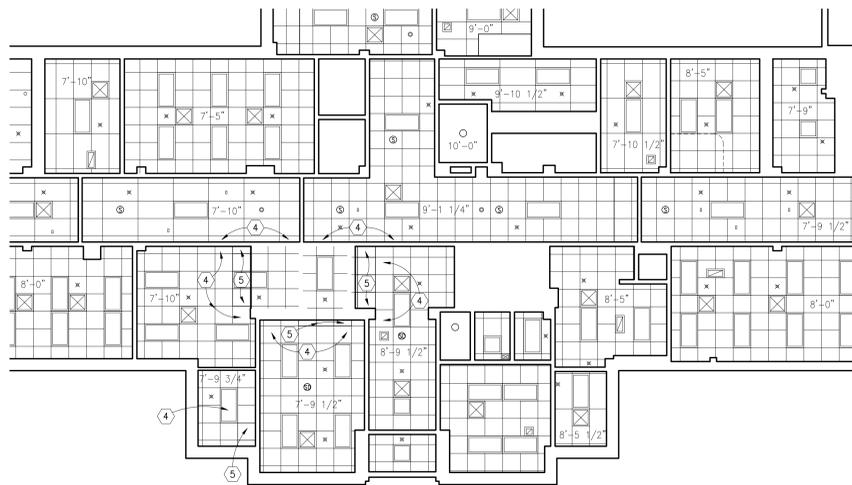
SECOND FLOOR REFLECTED CEILING REMODELING PLAN
1/8"=1'-0"



ATTIC REMODELING PLAN
1/8"=1'-0"



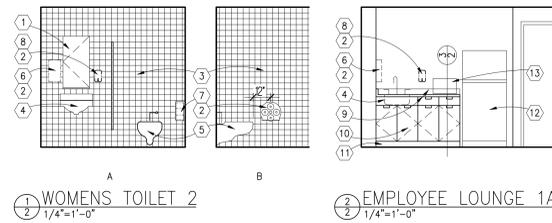
SECOND FLOOR REMODELING PLAN
1/8"=1'-0"



FIRST FLOOR REFLECTED CEILING REMODELING PLAN
1/8"=1'-0"

INTERIOR ELEVATION NOTES LEGEND:

- ① FRAMED MIRROR AND SHELF WITH CONCEALED HINGE (CC) SIZE AS INDICATED ON ELEV. PROVIDE BACKING AS REQUIRED
- ② PROVIDE BACKING AS REQUIRED FOR OWNER-FURNISHED ACCESSORIES
- ③ CERAMIC TILE WALL FINISH
- ④ SINK AND TRIM. SEE MECH. DWGS
- ⑤ TOILET. SEE MECH. DWGS
- ⑥ PAPER TOWEL DISPENSER (V V)
- ⑦ TOILET PAPER DISPENSER (V V)
- ⑧ SOAP DISPENSER (V V)
- ⑨ PLASTIC LAMINATE COUNTERTOP AND BACKSPLASH
- ⑩ PLASTIC LAMINATE BASE CABINET
- ⑪ BASE. SEE FINISH SCHEDULE
- ⑫ REFRIGERATOR (V V)
- ⑬ MICROWAVE (V V)



PARTITION TYPE LEGEND:

- A G.W.B./METAL STUD PARTITION, 4 7/8" THICK, TYPICAL UNLESS INDICATED OTHERWISE. EXTEND FROM FLOOR TO STRUCTURAL DECK ABOVE. 5/8" TYPE X G.W.B. EA. SIDE OF 3 5/8" METAL STUD AT 16" O.C. WITH 2" SOUND ATTENUATION BLANKET IN CAVITY. PROVIDE ACOUSTICAL SEAL AT INTERSECTION WITH DECK OR WALLS AND DUCT, PIPE AND CONDUIT PENETRATIONS. TYPICAL NOTE: USE FIRE/SMOKE SEALANT WHERE RATED WALL IS INDICATED.
- B 5/8" TYPE X GWB ON EXPOSED FACE OF 3 5/8" METAL STUD FURRING @ 16" O.C. PROVIDE FULL THICKNESS MINERAL FIBER INSULATION AND VAPOR BARRIER AT EXTERIOR WALL. EXTEND GWB AND FURRING FROM FLOOR TO STRUCTURE ABOVE.
- C 8" CMU SHAFT WALL.

RATING LEGEND:

- • — 1 HR FIRE RATED
- ◦ — COMBINED 1 HR RATED & SMOKE BARRIER

GENERAL NOTES:

1. REFER TO MECHANICAL DWGS FOR RELATED MECHANICAL REMODELING.
2. REFER TO ELECTRICAL DWGS FOR RELATED ELECTRICAL REMODELING.
3. REFER TO FIRE PROTECTION DWGS FOR RELATED FIRE PROTECTION REMODELING.
4. FILL ALL LOCATIONS WHERE TERRAZZO HAS BEEN REMOVED.
5. FILL ALL LOCATIONS WHERE MASONRY WALLS HAVE BEEN REMOVED.
6. PATCH TO MATCH EXISTING WHERE DAMAGED BY DEMOLITION.
7. REINSTALL SIGNAGE IN ORIGINAL LOCATION OR WHERE DIRECTED BY CONTRACTOR.
8. REINSTALL PICTURES/ARTWORK IN ORIGINAL LOCATION OR WHERE DIRECTED BY CONTRACTOR.
9. REINSTALL HANDRAILS AND CORNER GUARDS. PATCH TO MATCH EXISTING WHERE REQUIRED DUE TO REMODELING.

CEILING LEGEND:

- 2'-0" x 4'-0" CEILING GRID. INSTALL AT 8'-0" A.F.F. UNLESS NOTED OTHERWISE.
- 2'-0" x 2'-0" CEILING GRID. INSTALL AT 8'-0" A.F.F. UNLESS NOTED OTHERWISE.
- RECESSED FLUORESCENT LIGHT FIXTURE
- DOWN LIGHT FIXTURE
- SUPPLY GRILLE, CEILING DIFFUSER
- RETURN AIR/EXHAUST GRILLE
- SMOKE DETECTOR (SEE ELECTRICAL DRAWINGS)
- SPEAKER (SEE ELECTRICAL DRAWINGS)
- EXIT (SEE ELECTRICAL DRAWINGS)
- CEILING DEMOLITION

NEW HYDRAULIC ELEVATOR EQUIPMENT (P2):

NOTE: TO BE INSTALLED AND ACCEPTED AND IN CONTINUAL SERVICE FOR ONE (1) WEEK PRIOR TO BEGINNING DEMOLITION OF EXISTING TRACTION ELEVATOR (P1).

- P2 PROVIDE NEW HYDRAULIC ELEVATOR MACHINE ROOM EQUIPMENT, HOISTWAY EQUIPMENT INCLUDING CAB, SAFETIES, PIT EQUIPMENT, HOISTWAY DOORS AND HARDWARE, CALL STATIONS AND HALL LANTERNS.

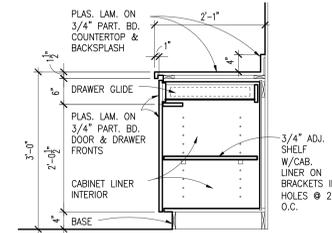
NEW HYDRAULIC ELEVATOR EQUIPMENT (P1):

NOTE: ALL WORK TO BEGIN AFTER ELEVATOR (P2) IS INSTALLED AND ACCEPTED AND IN CONTINUAL SERVICE FOR ONE (1) WEEK.

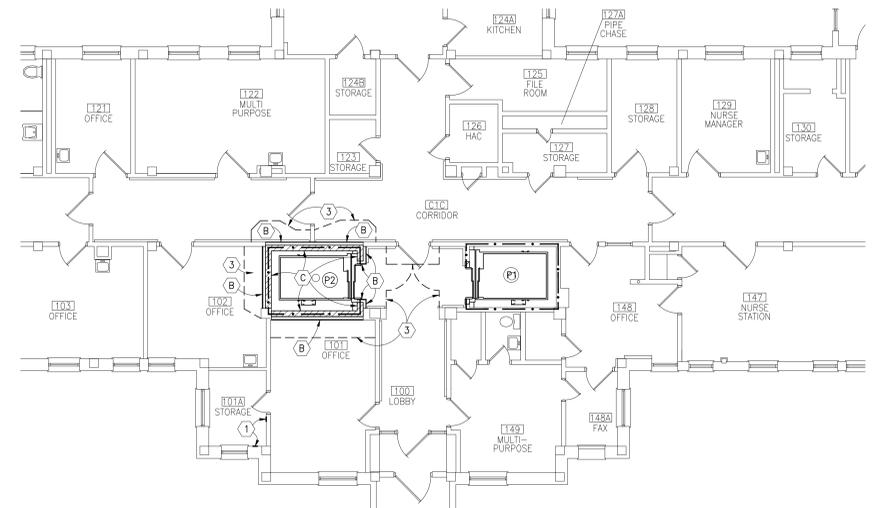
- P1 PROVIDE NEW HYDRAULIC ELEVATOR MACHINE ROOM EQUIPMENT, HOISTWAY EQUIPMENT INCLUDING CAB, SAFETIES, PIT EQUIPMENT, HOISTWAY DOORS AND HARDWARE, CALL STATIONS AND HALL LANTERNS.

REMODELING NOTES LEGEND:

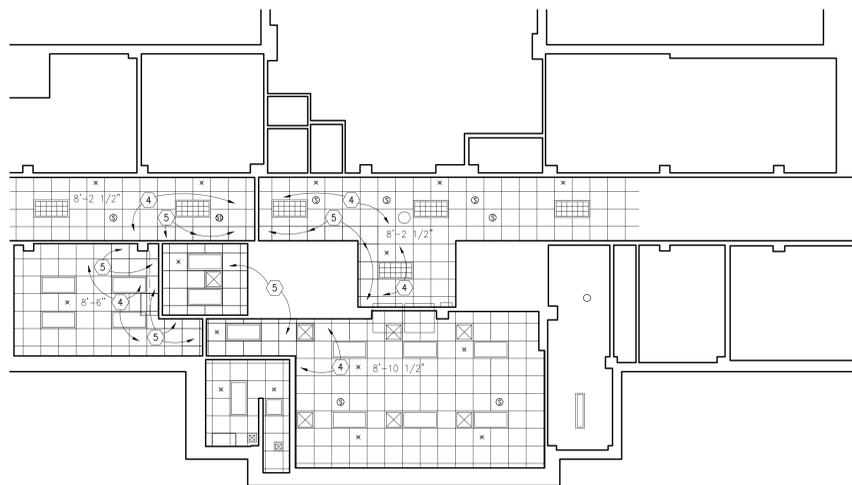
- ① INFILL AND PATCH TO MATCH EXISTING WALLS.
- ② NEW PLUMBING FIXTURES. SEE MECHANICAL.
- ③ REMOVE TEMPORARY CONSTRUCTION PARTITION. PATCH TO MATCH ANY DAMAGE TO EXISTING FINISHES.
- ④ EXIST. CEILING REMAINS. REMOVE & REINSTALL AS REQUIRED FOR MECHANICAL/ELECTRICAL WORK. SEE CEILING DEMOLITION PLANS FOR EXISTING CEILING HEIGHTS.
- ⑤ NEW A.T. CEILING AND SUSPENSION GRID AT 8'-0" UNLESS NOTED OTHERWISE.
- ⑥ LOCKERS TO BE FURNISHED AND INSTALLED BY VA.



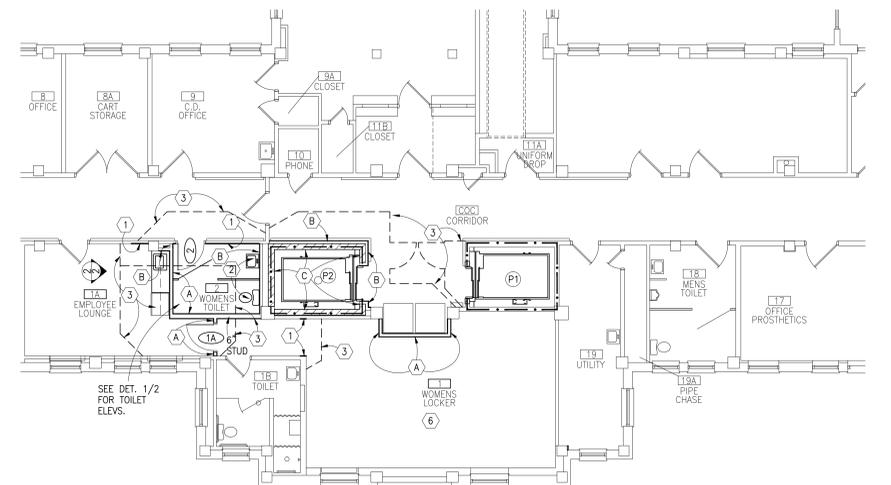
③ BASE CABINET DETAIL
3/4"=1'-0"



FIRST FLOOR REMODELING PLAN
1/8"=1'-0"



BASEMENT REFLECTED CEILING REMODELING PLAN
1/8"=1'-0"



BASEMENT REMODELING PLAN
1/8"=1'-0"

I:\Server\Project Data\106_50Cloud_VA02_Bldg_48_Elevator\CAD_Dwg\Plan_Dwg\Remo_Plan.dwg Rev: 2011-03-10

	<p>IMAGE GROUP INC. Architecture & Interiors 403 CENTER AVENUE, SUITE 300 MOORHEAD, MN 56560</p>	<p>SOLIEN & LARSON, PC CONSULTING STRUCTURAL ENGINEERS 3330 FEICHTNER DRIVE, SUITE 206 FARGO, NORTH DAKOTA 58103 TELEPHONE (701) 235-5593 FAX (701) 235-5594</p>	<p>ONE BUILDING SYSTEMS CONSULTANTS Fargo, ND • Grand Forks, ND • Minneapolis, MN 701.280.0500 • 701.775.2594 • 651.361.8728</p>	<p>Ulteigengineers Bismarck • Detroit Lakes • Fargo • Minneapolis • Sioux Falls 3350 38th Avenue South Fargo, North Dakota 58104</p>	<p>I hereby certify that this plan specification, or report was prepared by me or under my direct supervision, and that I am duly Registered Architect under the laws of the State of Minnesota.</p> <p style="text-align: right;">Date 2-28-2011, Reg. No. 21365</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>APPROVED SERVICE LINE DIRECTOR</td> <td>DATE</td> <td>APPROVED INFECTION CONTROL NURSE</td> <td>DATE</td> </tr> <tr> <td>APPROVED SERVICE LINE DIRECTOR</td> <td>DATE</td> <td>APPROVED PATIENT SAFETY</td> <td>DATE</td> </tr> <tr> <td>APPROVED PROJECTS SECTION MANAGER</td> <td>DATE</td> <td>APPROVED CHIEF OF POLICE</td> <td>DATE</td> </tr> <tr> <td>APPROVED DIRECTOR FMS</td> <td>DATE</td> <td>APPROVED SAFETY MANAGER</td> <td>DATE</td> </tr> </table>	APPROVED SERVICE LINE DIRECTOR	DATE	APPROVED INFECTION CONTROL NURSE	DATE	APPROVED SERVICE LINE DIRECTOR	DATE	APPROVED PATIENT SAFETY	DATE	APPROVED PROJECTS SECTION MANAGER	DATE	APPROVED CHIEF OF POLICE	DATE	APPROVED DIRECTOR FMS	DATE	APPROVED SAFETY MANAGER	DATE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>APPROVED CHIEF OF STAFF</td> <td>DATE</td> <td>APPROVED MEDICAL CENTER DIRECTOR</td> <td>DATE</td> </tr> </table>	APPROVED CHIEF OF STAFF	DATE	APPROVED MEDICAL CENTER DIRECTOR	DATE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>PROJECT TITLE</td> <td>DATE</td> </tr> <tr> <td>BUILDING 48 ELEVATOR</td> <td>February 28, 2011</td> </tr> <tr> <td>PROJECT NO.</td> <td>656-10-180</td> </tr> <tr> <td>CAD FILE</td> <td>Reno_Plans</td> </tr> <tr> <td>DRAWING NO.</td> <td>A2 Dwg. 3 OF 12</td> </tr> </table>	PROJECT TITLE	DATE	BUILDING 48 ELEVATOR	February 28, 2011	PROJECT NO.	656-10-180	CAD FILE	Reno_Plans	DRAWING NO.	A2 Dwg. 3 OF 12	
APPROVED SERVICE LINE DIRECTOR	DATE	APPROVED INFECTION CONTROL NURSE	DATE																																				
APPROVED SERVICE LINE DIRECTOR	DATE	APPROVED PATIENT SAFETY	DATE																																				
APPROVED PROJECTS SECTION MANAGER	DATE	APPROVED CHIEF OF POLICE	DATE																																				
APPROVED DIRECTOR FMS	DATE	APPROVED SAFETY MANAGER	DATE																																				
APPROVED CHIEF OF STAFF	DATE	APPROVED MEDICAL CENTER DIRECTOR	DATE																																				
PROJECT TITLE	DATE																																						
BUILDING 48 ELEVATOR	February 28, 2011																																						
PROJECT NO.	656-10-180																																						
CAD FILE	Reno_Plans																																						
DRAWING NO.	A2 Dwg. 3 OF 12																																						