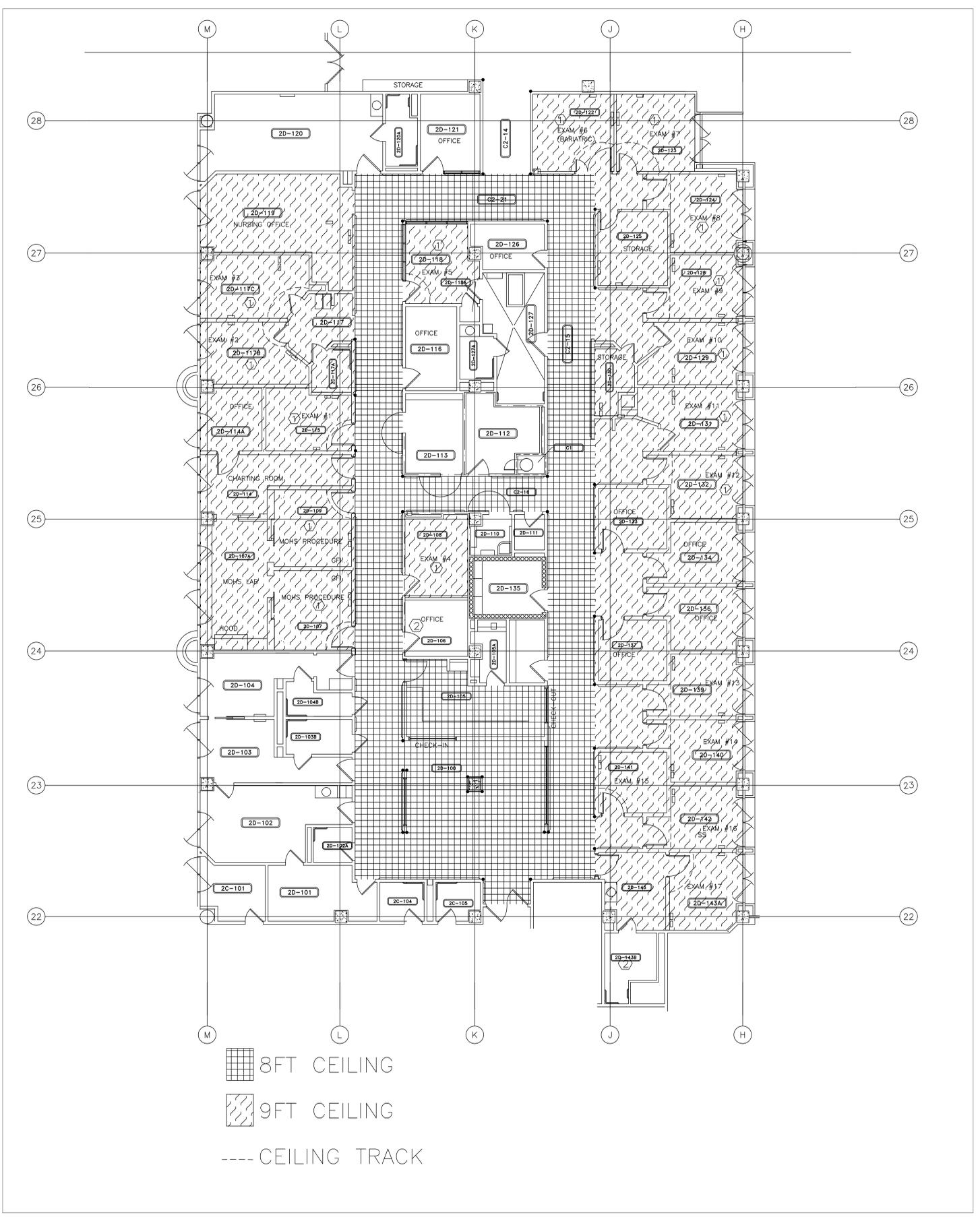


three sixths = one foot
 one and one-half inch = one foot
 one inch = one foot
 three-quarter inch = one foot
 one-half inch = one foot
 one-quarter inch = one foot
 one-eighth inch = one foot
 one-sixteenth inch = one foot



GENERAL NOTES

1. REMOVE EXISTING CEILING TILE AND GRID. REPLACE WITH 2'X4' ACOUSTIC CEILING TILE. MFR: CHICAGO METALIC SNAP GRID 200'5/16" EXPOSED CEILING GRID, ARMSTRONG FISSURED 2' X 4' LAY-IN CEILING.
2. AT TRANSITION FROM 8FT CORRIDOR CEILING TO 9FT CEILING, CONSTRUCT A BULKHEAD WITH 2 INCH REVEAL FROM CORRIDOR. SEE WARD 4K FOR EXAMPLE.
3. CEILING TRACK LOCATION DUPLICATED ON ARCH SHEET FOR CLARITY. CEILING TRACK IS CONTRACTOR PURCHASED-CONTRACTOR INSTALLED (C C).

NOTES

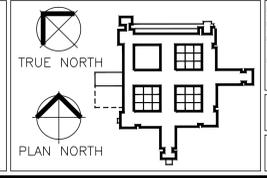
① PROVIDE STRUCTURAL SUPPORT FOR CEILING-MOUNTED EXAM LIGHTS. SEE MEP DRAWING FOR MFR DESCRIPTION.

REVISIONS	DATE

GENERAL NOTES:

GENERAL CONTRACTOR AND/OR ALL SUBCONTRACTORS SHALL FIELD VERIFY ALL DIMENSIONS SHOWN ON THESE PLANS AND SHALL BE RESPONSIBLE FOR VARIATIONS BETWEEN PLAN DIMENSIONS AND ACTUAL FIELD DIMENSIONS, WHERE VARIATIONS ARE FOUND TO OCCUR, THE CONTRACTOR SHALL NOTIFY THE PROJECT ENGINEER IN WRITING PRIOR TO PROCEEDING WITH CONSTRUCTION; NO ADJUSTMENT TO THE WORK WILL BE MADE WITHOUT THE PRIOR APPROVAL OF THE PROJECT ENGINEER.

GENERAL CONTRACTOR SHALL BE RESPONSIBLE FOR GENERAL DEMOLITION INCLUDING REMOVAL OF WALLS, PARTITIONS, DOORS & CEILING & FLOORS. ANY AND ALL CUTTING OF CONCRETE FLOORS, WALLS OR STRUCTURE SHALL BE THE GENERAL CONTRACTOR'S RESPONSIBILITY. CORE DRILLING THROUGH CONCRETE WALLS, FLOORS OR STRUCTURE FOR PIPING OR CONDUIT SHALL BE THE RESPONSIBILITY OF THE SUBCONTRACTOR BY TRADE; FIRESTOPPING OF THESE OPENING SHALL BE DONE BY THE RESPECTIVE SUBCONTRACTOR. REMOVAL OF DEBRIS RESULTING FROM DEMOLITION, CUTTING, AND/OR DRILLING IS THE RESPONSIBILITY OF THE GENERAL CONTRACTOR. PATCHING AND REPAIR OF CONCRETE WALLS, FLOOR, OR STRUCTURE SHALL BE THE RESPONSIBILITY OF THE GENERAL CONTRACTOR; THIS WILL BE ACCOMPLISHED UPON COMPLETION OF THE INSTALLATION OF ANY AND ALL UTILITIES INSTALLED BY THE VARIOUS SUBCONTRACTORS.



I HEREBY CERTIFY THAT THIS PLAN, SPECIFICATION OR REPORT WAS PREPARED BY ME OR UNDER MY DIRECT SUPERVISION AND THAT I AM A DULY REGISTERED PROFESSIONAL ARCHITECT UNDER THE LAWS OF THE STATE OF MINNESOTA. REGISTRATION NUMBER: _____

Drawing Title
CEILING

Approved: Division Chief
Approved: Service Director

Project Title
MOHS RENOVATION

Location
V.A. MEDICAL CENTER
ONE VETERANS DRIVE
MINNEAPOLIS, MN 55417

Project No.
618-12-135

Building Number
70

DRAWING NO.
1247-A6

Dwg. 7 of 12

Office of Facilities Management

Department of Veterans Affairs

Drawing Scale
1/8" = 1'-0"

Plot Scale
12" = 1'-0"

Date
7 FEB 12

Checked
Drawn