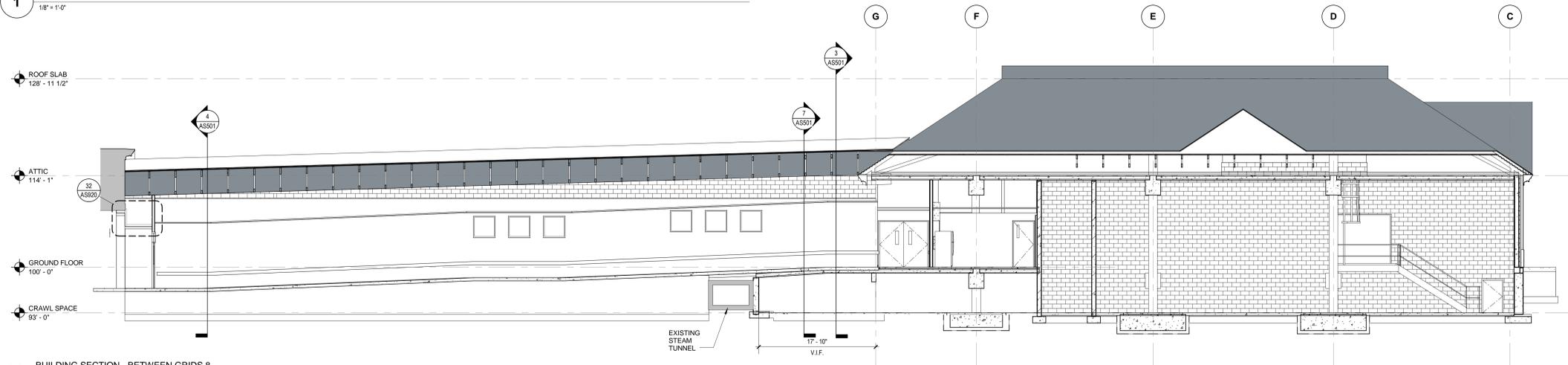
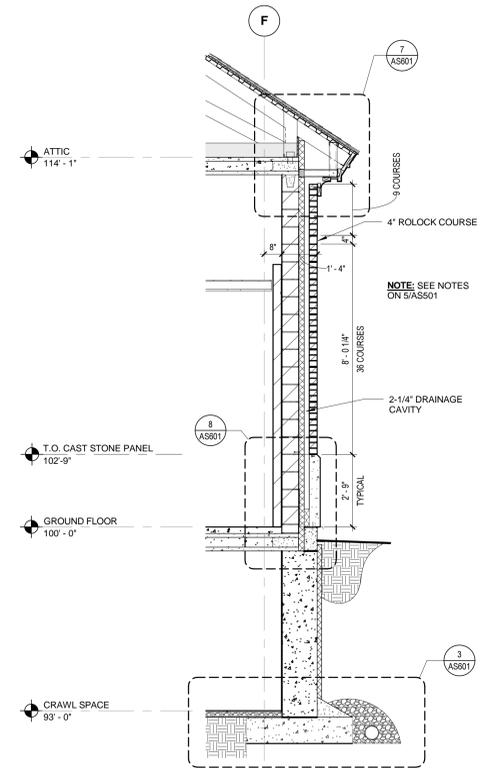


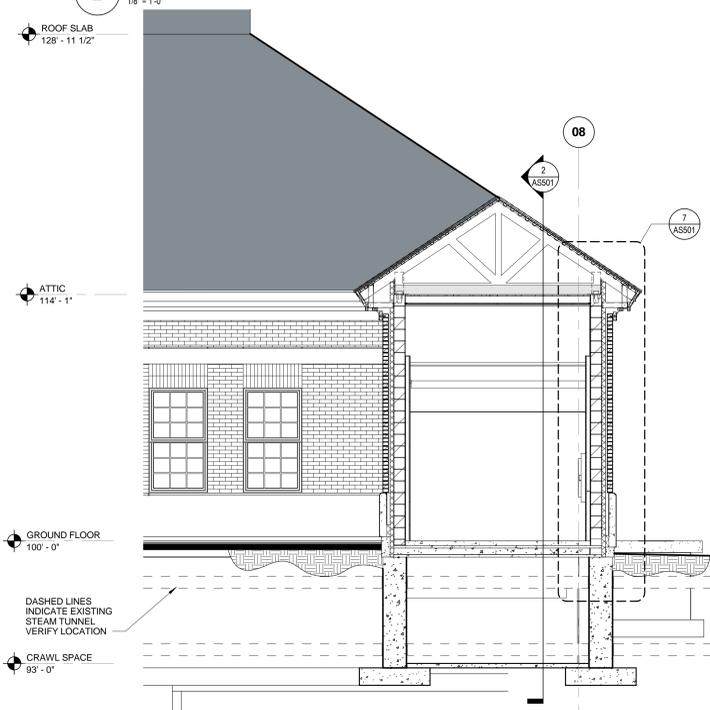
1 BUILDING SECTION - BETWEEN GRIDS 4 AND 5 LOOKING WEST
18" = 1'-0"



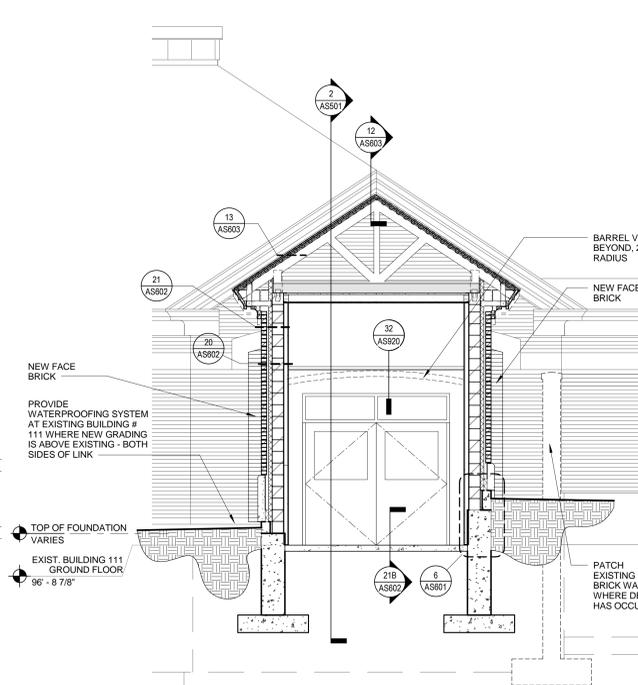
2 BUILDING SECTION - BETWEEN GRIDS 8 AND 9 LOOKING WEST
18" = 1'-0"



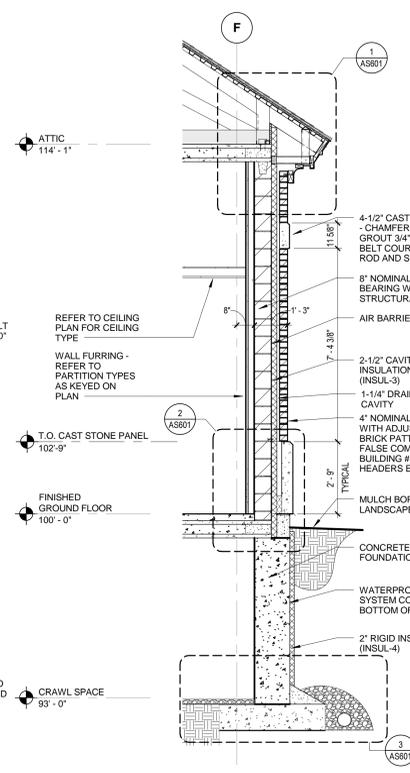
8 WALL SECTION AT 1ST BRICK BUMPOUT
38" = 1'-0"



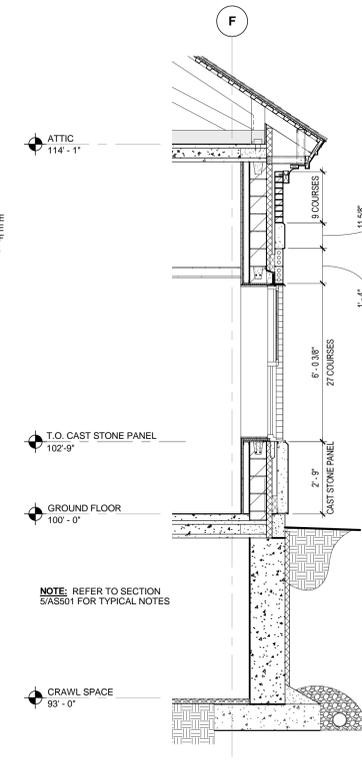
3 BUILDING SECTION / ELEVATION AT CONNECTION LINK - LOOKING NORTH
14" = 1'-0"



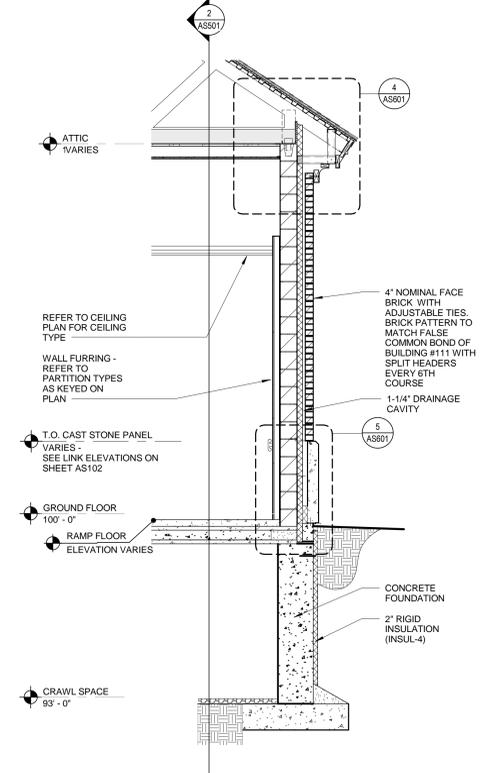
4 BUILDING SECTION / ELEVATION AT CONNECTION LINK - LOOKING SOUTH
14" = 1'-0"



5 WALL SECTION - TYPICAL
38" = 1'-0"



6 WALL SECTION AT WINDOW
38" = 1'-0"



7 WALL SECTION AT CONNECTION LINK
38" = 1'-0"

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

100% OWNER REVIEW
NOT FOR CONSTRUCTION
12/16/2011



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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 Architect under the laws of the State of Minnesota.
Signature _____
Registration No. _____
Date _____

APPROVED SERVICE LINE DIRECTOR	DATE	APPROVED INFECTION CONTROL NURSE	DATE
APPROVED GENM COORDINATOR	DATE	APPROVED PATIENT SAFETY	DATE
APPROVED PROJECTS SECTION MANAGER	DATE	APPROVED CHIEF OF POLICE	DATE
APPROVED DIRECTOR FMS	DATE	APPROVED SAFETY MANAGER	DATE

DRAWING TITLE BUILDING SECTION AND WALL SECTIONS			
APPROVED CHIEF OF STAFF	DATE	APPROVED MEDICAL CENTER DIRECTOR	DATE

PROJECT TITLE LONG TERM / INTERMEDIATE PSYCHIATRIC UNIT	DATE 12/16/2011
BUILDING No.	CHECKED BY
LOCATION 4801 VETERANS DRIVE, ST CLOUD MN	DATE 12/16/2011

