

1 WASTE AND VENT RISER

GENERAL NOTES:

1. ALL DOMESTIC WATER AND WASTE TO BE RUN IN CRAWLSPACE.
2. REFER TO PLUMBING CONNECTION SCHEDULE FOR BRANCH SIZE TAKE-OFFS TO PLUMBING FIXTURES.

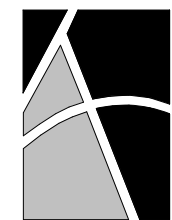
100% OWNER REVIEW  
NOT FOR CONSTRUCTION  
12/16/2011



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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 Engineer under the laws of the State of Minnesota.

Signature

Registration No.

Date 11/17/2011

APPROVED: SERVICE LINE DIRECTOR	DATE	APPROVED: INFECTION CONTROL NURSE	DATE
APPROVED: GEMS 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	DATE
WASTE AND VENT RISER DIAGRAM	
APPROVED: CHIEF OF STAFF	DATE
APPROVED: MEDICAL CENTER DIRECTOR	DATE

PROJECT TITLE	LONG TERM / INTERMEDIATE PSYCHIATRIC UNIT
BUILDING No.	
CHECKED BY	
CHECKER	
AUTHOR	
LOCATION	4801 VETERANS DR. SAINT CLOUD, MN

DATE	12/16/2011
SCALE	AS NOTED
PROJECT NO.	2032.001.00
CAD FILE	
DWG. NO.	P200
SHEET	02



**VAMC** SAINT CLOUD MN