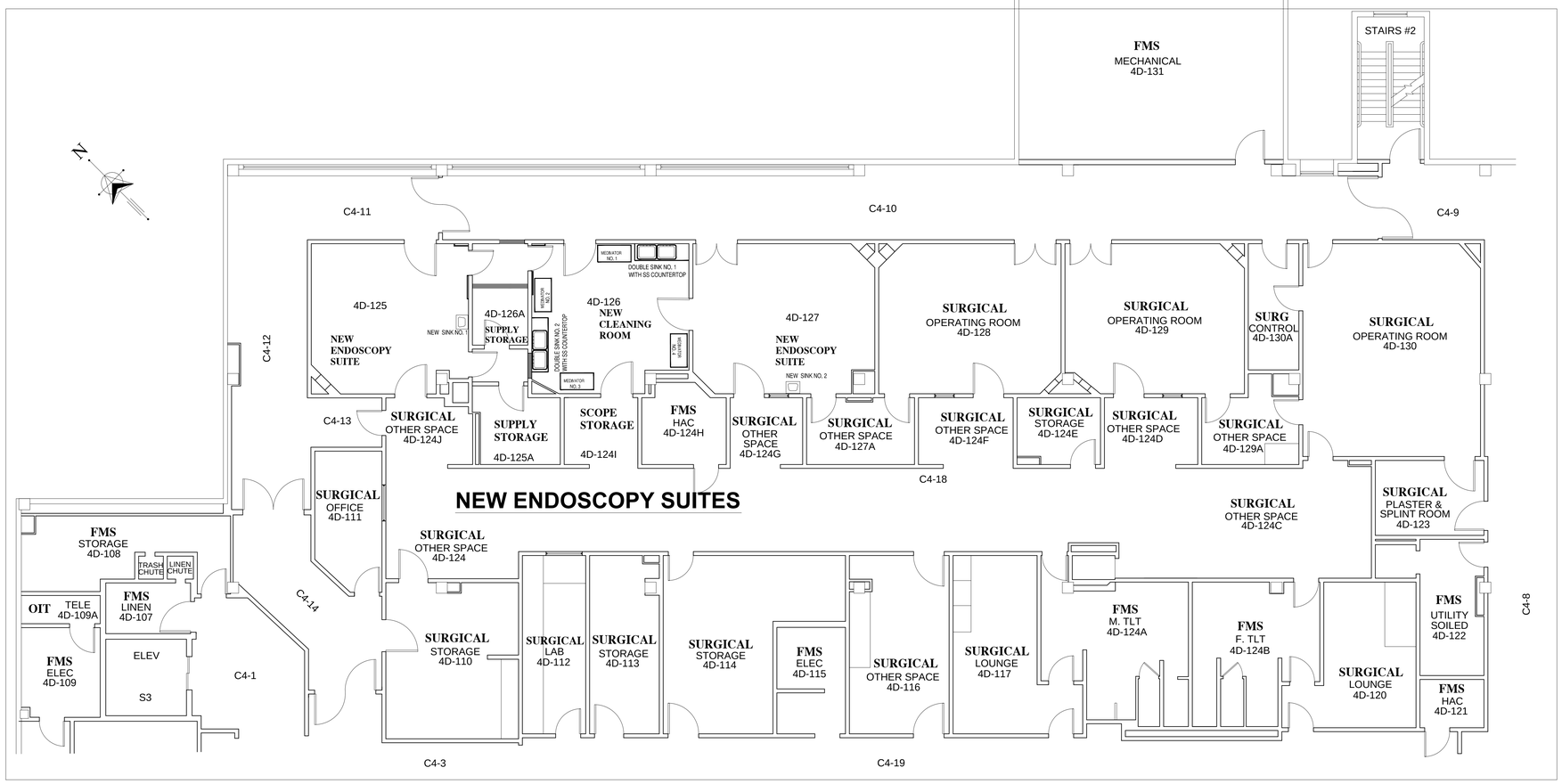
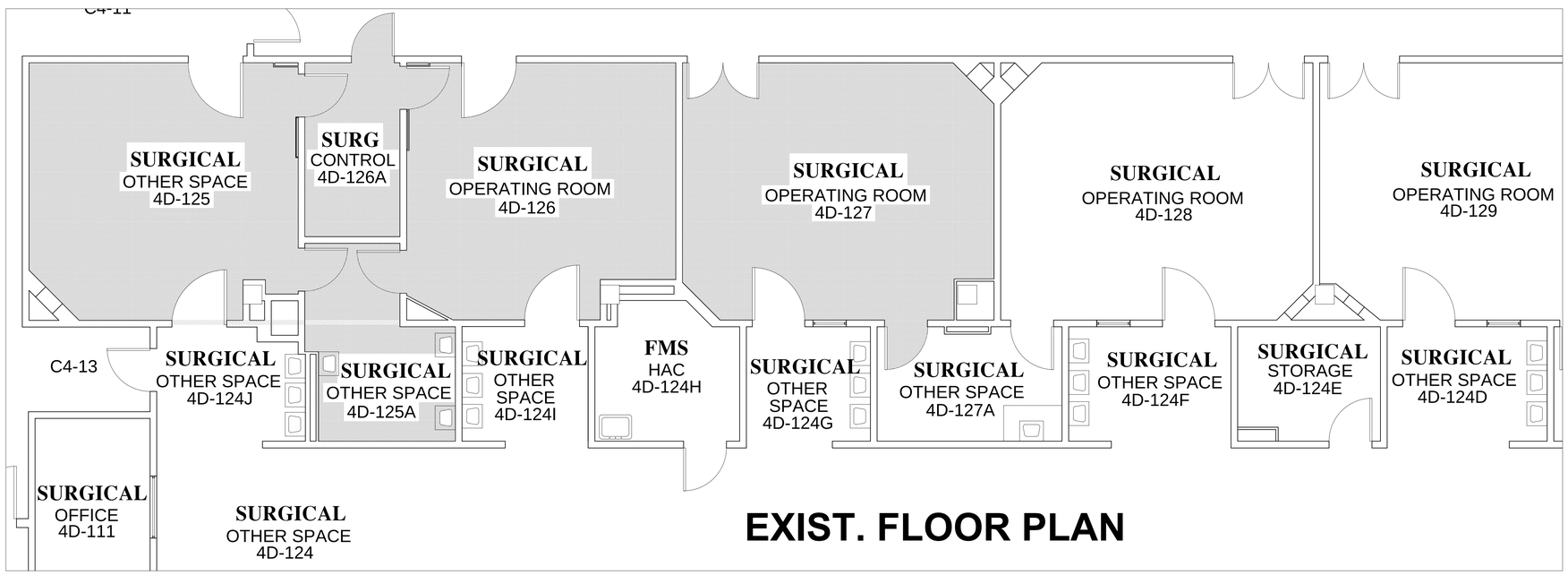


GENERAL NOTES

1. Adhere to All Conditions of Infection Control Permit at All Times.
2. Contractor to Coordinate All Work Through the Contracting Officer Representative (COR).
3. All Work to be Done in Strict Accordance with Manufacturers Installation Guidelines and Recommended Practices, VA Guidelines and Project Specifications.
4. Contractor's Workmen Shall Provide and Utilize All Safety Requirements in Accordance with OSHA Regulations During All Phases of the Work. Contractor Shall Provide and Utilize Scaffolding and Ladders in Accordance with ALL OSHA Regulations.
5. Contractor Shall Enter Project Work Area Using Elevator S3 and take most Direct Route to Work site Area.
6. All Workers Are to be Properly Badged Prior to Performing any Duties of this Project.
7. Contractor Shall Seal All Holes, Pipes, Conduits, Penetrations or Punctures within the envelope of the Work Area in Appropriate Manner. Method of Sealing Must Maintain the Construction Areas Required Fire/ Smoke Rating.
8. Contractor Shall Fully Implement and Follow the Specifications of Construction Waste Management, Section 017419, Regarding Construction and Demolition Recycling.



EXIST. FLOOR PLAN

DEMOLITION NOTES

1. Remove Electrical Panels and Elec. Raceways & Wiring to Feeder Panel for Room 4D-126A. See Elec. Plan for Feeder Location.
2. Repair as Necessary All Flooring in Shaded Area.
3. Remove Sinks and Casework in Room 4D-125A and 4D-124I.
4. Close in Area of Both Windows in Room 4D-126A with metal Studs and Double Sided Gyp Board. Prime and Paint Gyp Board to Match Existing Room Color.
5. Repair all Flooring in Rooms 4D-125, 4D-126A,4D-126, 4D-127,4D-125A and 4D-124I AS NECESSARY.

Revisions | Date

NOTES:

SCALE : 3/8" = 1'-0"

Approved:

PROGRAM MANAGER, PROJECTS
SAFETY/INDUSTRIAL HYGIENE
HEALTH SYSTEM SPECIALIST
MAINTENANCE SUPERVISOR
MAINTENANCE FOREMAN
MAINTENANCE FOREMAN

Drawing Title: NEW FLOOR PLAN

Project Title: RENOVATE CYSTO TO STERILE CLEANING, BLDG. 3

Date: 07/16/13

Project No.: 520-13-130

Approved: Service Engineer

Building Number: B3

Checked

Drawn

Approved: Service Director

Location: VAMC BILOXI, MS

DRAWING NO.: AR 001

Dwg. 1 Of 1

Office of Facilities

Department of Veterans Affairs

VA FORM 08-6231, DEC 1989