



| KEY                                                         | PLAN                                                                                                                                                                                                                           |                                                                  |                                          |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|------------------------------------------|
|                                                             | PROJECT SITE                                                                                                                                                                                                                   |                                                                  |                                          |
| STAM                                                        | P                                                                                                                                                                                                                              | NORTH                                                            |                                          |
| SITE<br>OMIS<br>ALL<br>AND<br>JURIS<br>DO N<br>THIS<br>CONS | CONTRACTORS TO VERI<br>AND TO REPORT ALL<br>SIONS TO THE ARCHITE<br>CONTRACTORS MUST C<br>BYLAWS AND OTHER A<br>SDICTION OVER THE WO<br>NOT SCALE DRAWINGS.<br>DRAWING MAY NOT BE<br>STRUCTION UNTIL SIGNE<br>(RIGHT RESERVED. | ERRORS AND/OF<br>CT.<br>OMPLY WITH ALL<br>UTHORITIES HAV<br>DRK. | ₹<br>_ CODES<br>ING                      |
| 14                                                          |                                                                                                                                                                                                                                |                                                                  |                                          |
| 12<br>11<br>10<br>09                                        |                                                                                                                                                                                                                                |                                                                  |                                          |
| 08<br>07<br>06<br>05<br>04                                  |                                                                                                                                                                                                                                |                                                                  |                                          |
| 03<br>02<br>01<br>NO.                                       | ISSUED FOR SITI<br>ISSUED FOR CLIENT<br>REVISION                                                                                                                                                                               |                                                                  | 01/12/23<br>06/04/21<br>MM/DD/YY<br>DATE |
|                                                             | WOODMAN<br>A S S O C I A<br>4 BEECHWOOD AVENUE, OT<br>513 228 9850. FAX 613 228 9                                                                                                                                              | T E S L T                                                        | <b>D</b> .<br>NADA KIL8L9                |
| STRU<br>MECH                                                | EULTANTS:<br>CTURAL –<br>IANICAL –<br>TRICAL –<br>ECT:                                                                                                                                                                         |                                                                  |                                          |
| DRAW                                                        |                                                                                                                                                                                                                                | JOSEPH,<br>'A, ON                                                |                                          |
|                                                             | E DETAILS                                                                                                                                                                                                                      |                                                                  | <sup>1964</sup>                          |
| DATE<br>SCALE<br>DRAWI<br>REVIE                             |                                                                                                                                                                                                                                |                                                                  | <sup>1964</sup><br><b>00a</b><br>18575   |