

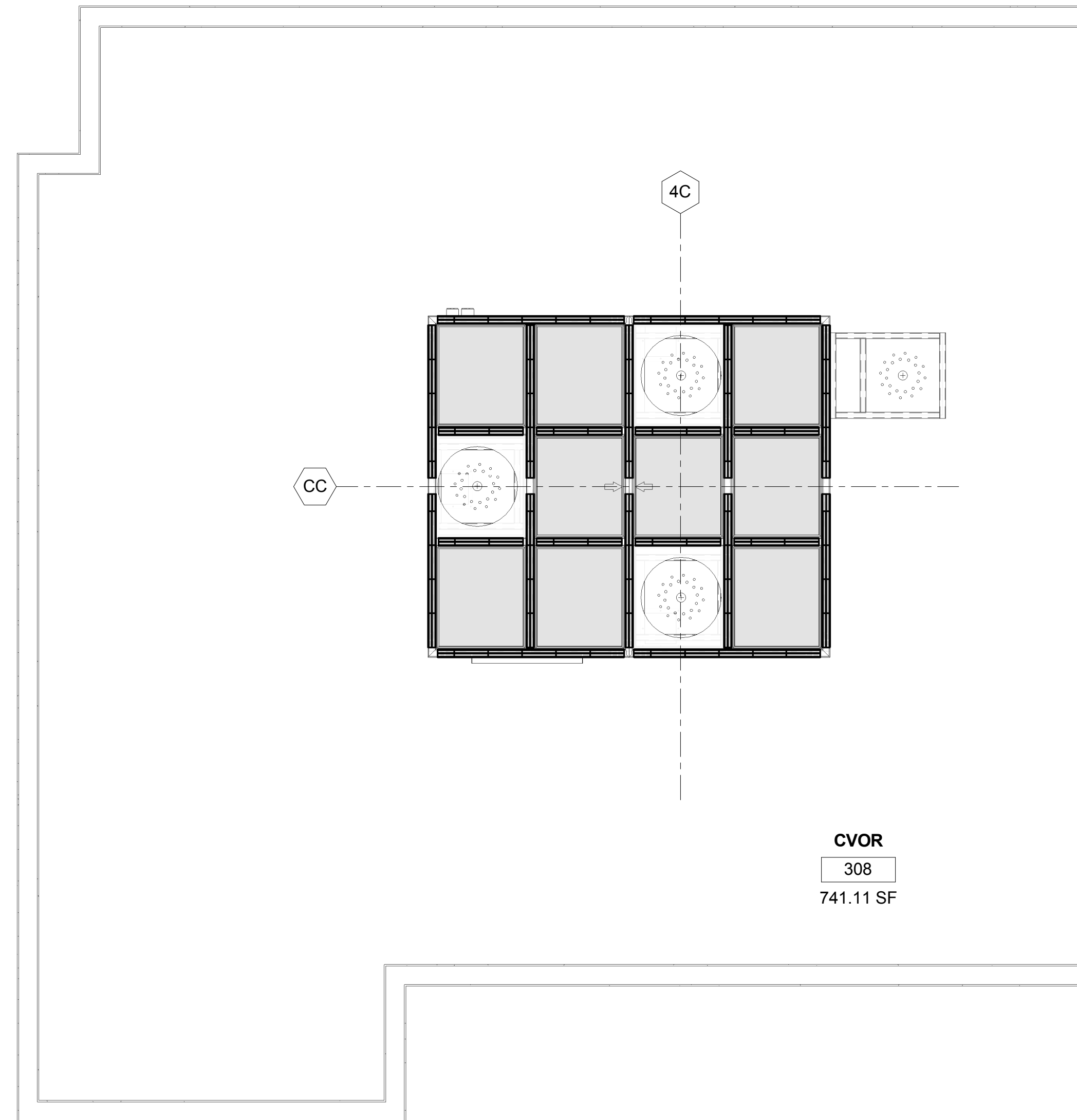
# HUNTAIR

CLEANSUITE®

## 10038B 8 (General Split Mount)

| DRAWING LIST  |      | DATE : 09/28/2017          |
|---------------|------|----------------------------|
| DRAWING NO. 1 | M1.0 | GENERAL NOTES              |
| DRAWING NO. 2 | M2.0 | MODULE LAYOUT              |
| DRAWING NO. 3 | M3.0 | BOOM LAYOUT                |
| DRAWING NO. 4 | M4.0 | STRUCTURAL LAYOUT          |
| DRAWING NO. 5 | M5.0 | GRID ASSEMBLY & ELECTRICAL |
| DRAWING NO. 6 | M6.0 | LIGHTING CALCULATIONS      |

THIS DRAWING PACKAGE, SPECIFICATIONS, AND CONCEPTS CONTAINED HEREIN ARE THE SOLE PROPERTY OF NORTEK AIR SOLUTIONS, AND MAY NOT BE REPRODUCED OR USED IN ANY FASHION WITHOUT THE PRIOR WRITTEN PERMISSION OF NORTEK AIR SOLUTIONS.



1 ROOM LAYOUT  
3/8" = 1'-0"

### GENERAL NOTES

- THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS PRIOR TO STARTING WORK. THE ENGINEER SHALL BE NOTIFIED OF ANY DISCREPANCIES.
- THE CONTRACTOR SHALL PROVIDE AND MAINTAIN ADEQUATE ERECTION SHORING AND BRACING AS REQUIRED FOR STABILITY OF ALL STRUCTURES DURING ALL PHASES OF CONSTRUCTION.
- IN NO CASE SHALL WORKING DRAWINGS BE SCALED FROM PLANS, SECTIONS OR DETAILS ON THE DRAWINGS.
- THE CONTRACT STRUCTURAL DRAWINGS REPRESENT THE FINISHED STRUCTURES. THEY DO NOT INDICATE METHODS OF CONSTRUCTION. THE CONTRACTOR SHALL PROVIDE ALL MEASURES NECESSARY TO PROTECT EXISTING AND NEW STRUCTURES DURING CONSTRUCTION. SUCH MEASURES SHALL INCLUDE, BUT ARE NOT LIMITED TO, BRACING, SHORING, ETC. FOR ALL CONSTRUCTION PHASE LOADS.
- ALL WORK SHALL BE PERFORMED IN COMPLIANCE WITH 2006 INTERNATIONAL BUILDING CODE (IBC) AS AMENDED BY THE STATE OF **NEW YORK**.
- SEE STRUCTURAL DRAWINGS FOR CLEANSUITE SUPPORT DETAILS

### STRUCTURAL STEEL CONT'D

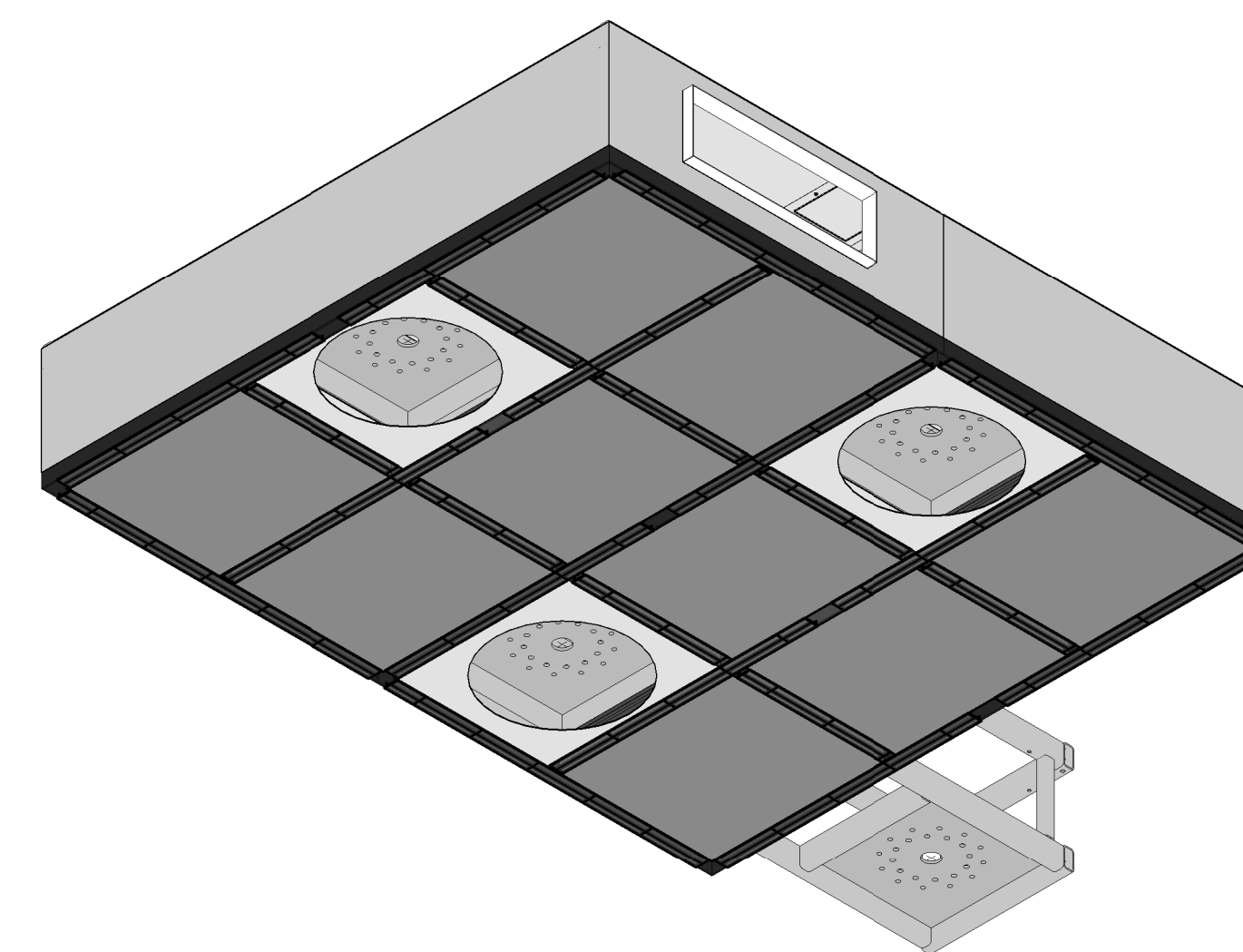
- WELDED CONNECTIONS:
  - WELD MATERIAL:
    - TENSILE STRENGTH: 86 KSI
    - YIELD STRENGTH: 76 KSI AS WELDED WITH 75/ 25%
    - WELD TYPE: FCAW-G FILL METAL E71T-7M
- BOLTED CONNECTIONS:
 

**TOP, BOTTOM AND CORNERS OF CLEANSUITE CONNECTIONS:**

  - GRADE 5 EQUIVALENT DIA 5/8" BOLT, 24.00" OC.
  - USE A HARDENED WASHER BENEATH THE TURNED ELEMENT OF THE BOLT OF NUT. HARDENED WASHER TO BE AT LEAST 5/16" THICK CONFORMING TO ASTM F436.
  - HOLES HAVE A STANDARD OVERSIZE CALL OUT UNLESS OTHERWISE NOTED.
  - TIGHTEN BOLTS SNUG UNTIL ALL PLIES OF THE JOINT ARE IN FIRM CONTACT
  - ENLARGE BOLT HOLES BY REAMING IF NECESSARY. DO NOT TORCH CUT.

### STRUCTURAL STEEL

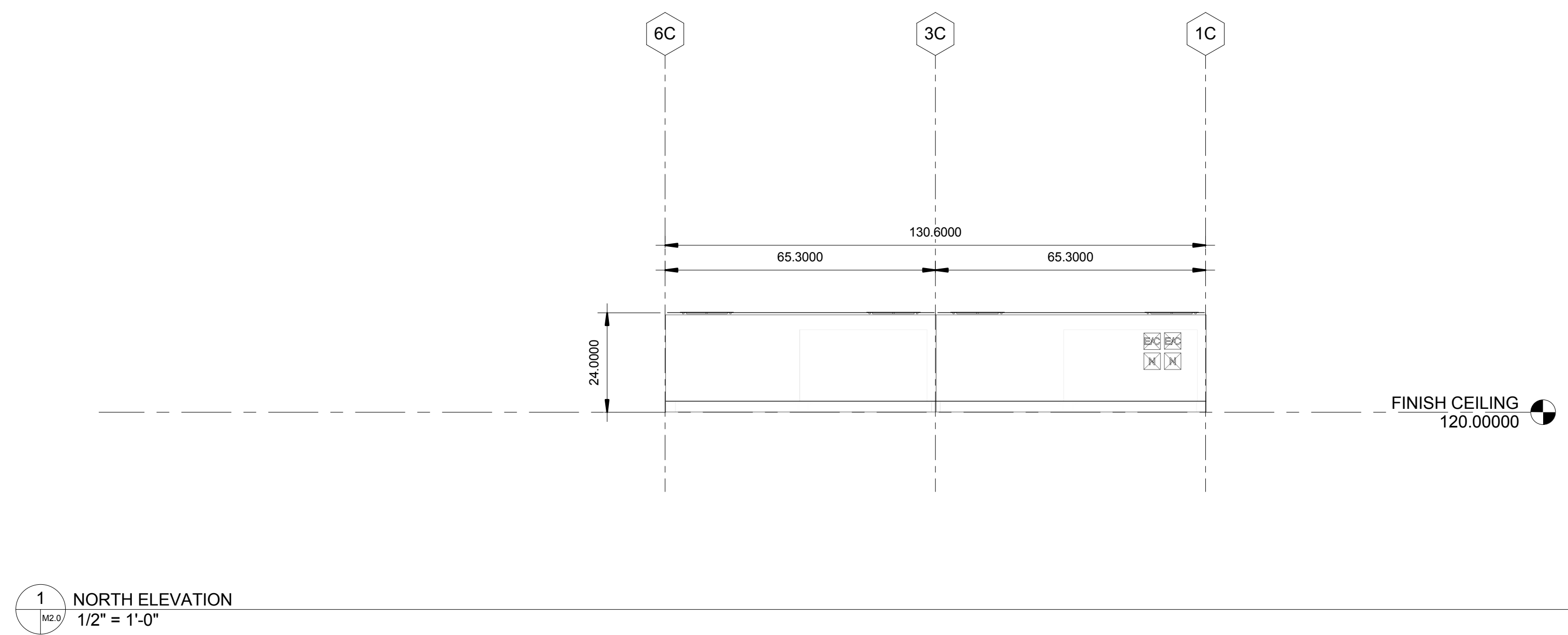
- MATERIAL SHALL CONFORM AS FOLLOWS:
  - TUBE STEEL HOLLOW STRUCTURAL SECTION: ASTM A500 FY= 48KSI, GRADE B.
  - SHEET METAL: ASTM A653 FY= 36KSI
  - PIPE: ASTM A53, FY= 36 KSI
  - BOLTS: (GRADE 5 EQUIVALENT)



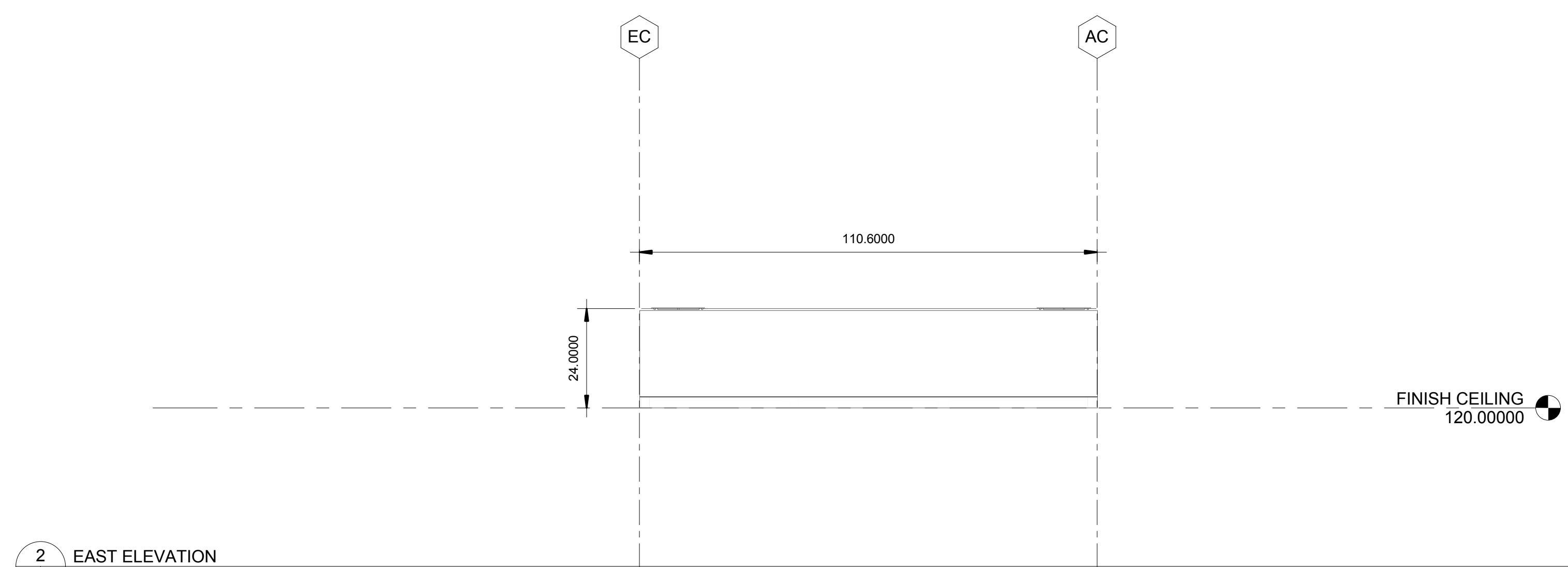
2 CLEANSUITE

| REV. NO.   | REVISION DESCRIPTION | APPROVED      | DATE         | AS BUILT DATE |
|--|----------------------|---------------|--------------|---------------|
| STAMP:   |                      |               |              |               |
| <p>19855 SW 124th Ave<br/>TUALATIN, OR 97062<br/>Phone (503) 639-0113 Fax (503) 639-1296<br/>www.nortekair.com</p> |                      |               |              |               |
| HOSPITAL NAME_ OR  |                      |               |              |               |
| <b>GENERAL NOTES</b>   |                      |               |              |               |
| HOSPITAL NAME<br>HOSPITAL NAME<br>ADDRESS<br>CITY, STATE ZIP   |                      |               |              |               |
| APPROVALS  |                      | DATE          |              |               |
| DESIGNED   |                      |               |              |               |
| CHECKED  |                      |               |              |               |
| ENGINEERING  |                      |               |              |               |
| APPROVED   |                      |               |              |               |
| REV CODE   |                      |               |              |               |
| FILE NAME  | XX-XXXX              | DRAWING NO.   | M1.0         |               |
| OLD FILE NAME  |                      | ROOM SCALE    | 1 : 1        | WORK TO DO    |
|  |                      | DRAWING SCALE | As indicated |               |

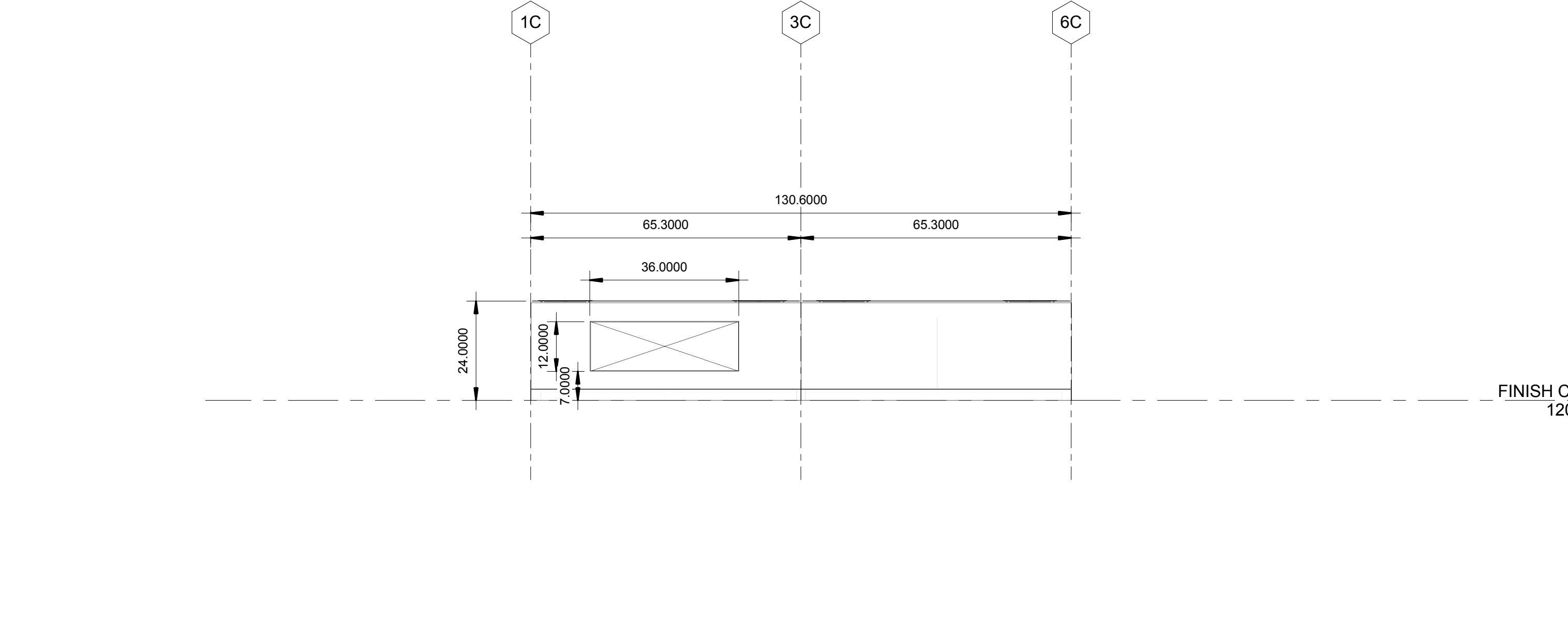
INDICATES ISO CENTER  
 INDICATES AIR FLOW



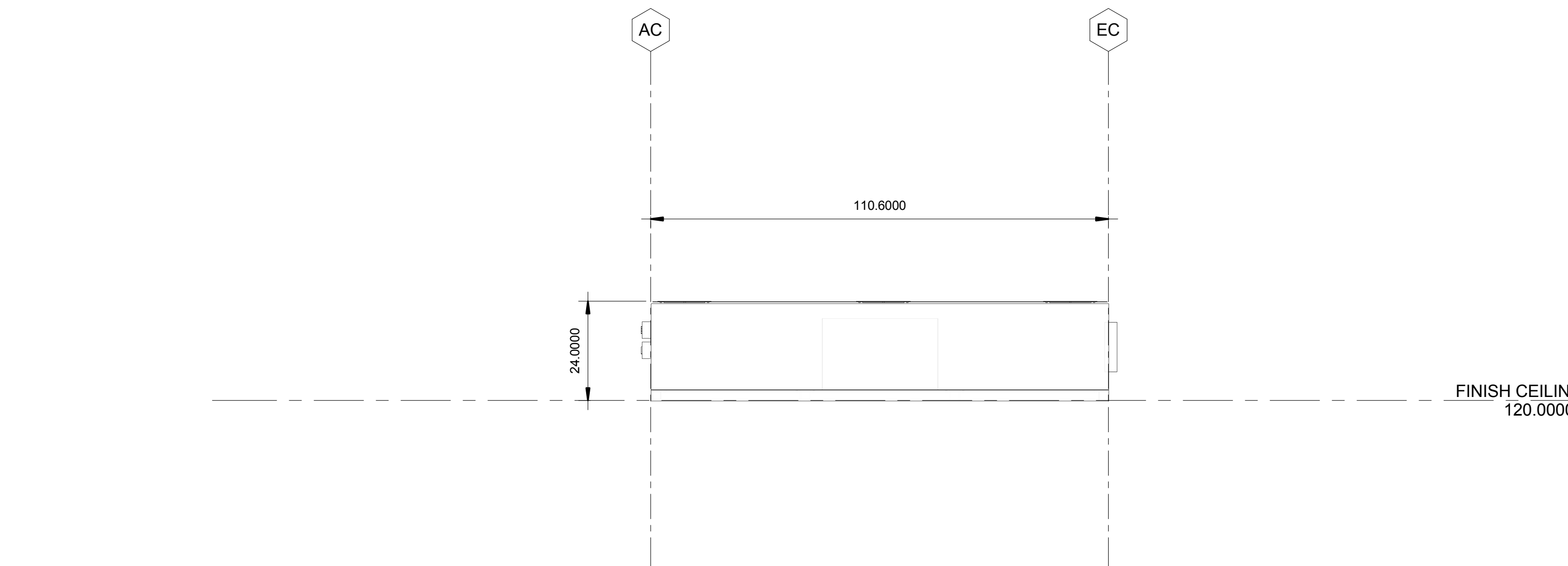
1 NORTH ELEVATION  
 1/2" = 1'-0"



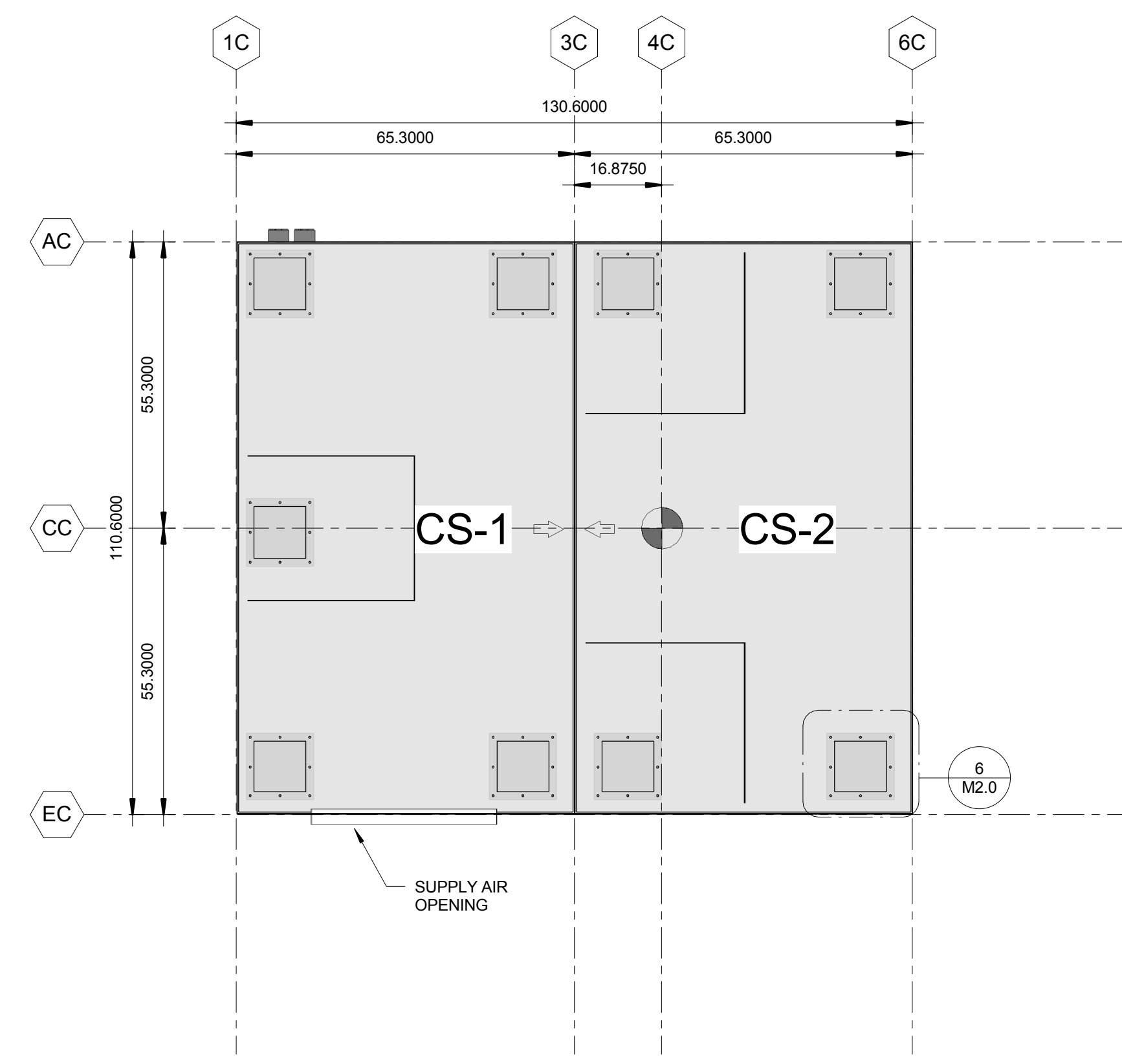
2 EAST ELEVATION  
 1/2" = 1'-0"



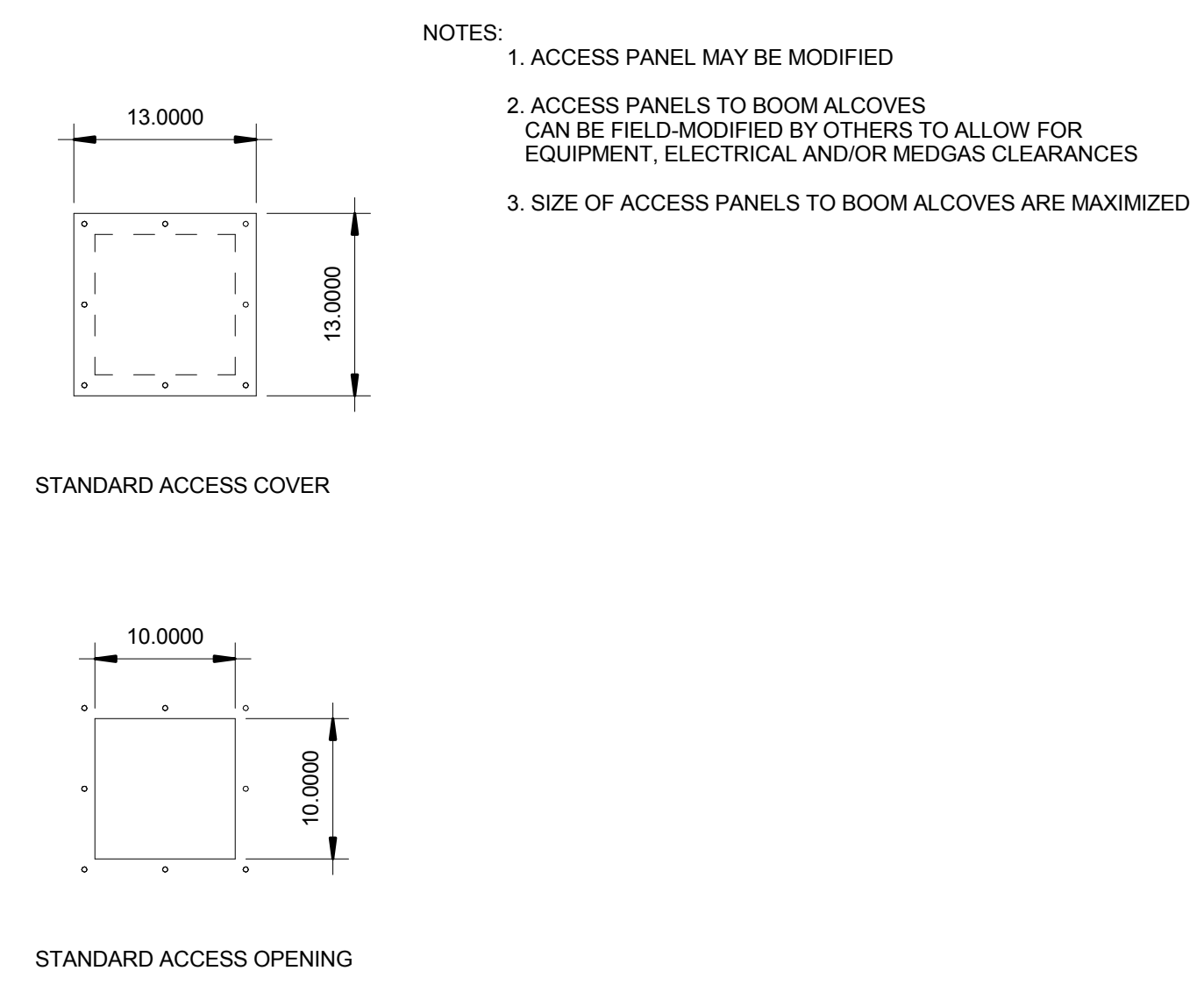
3 SOUTH ELEVATION  
 1/2" = 1'-0"



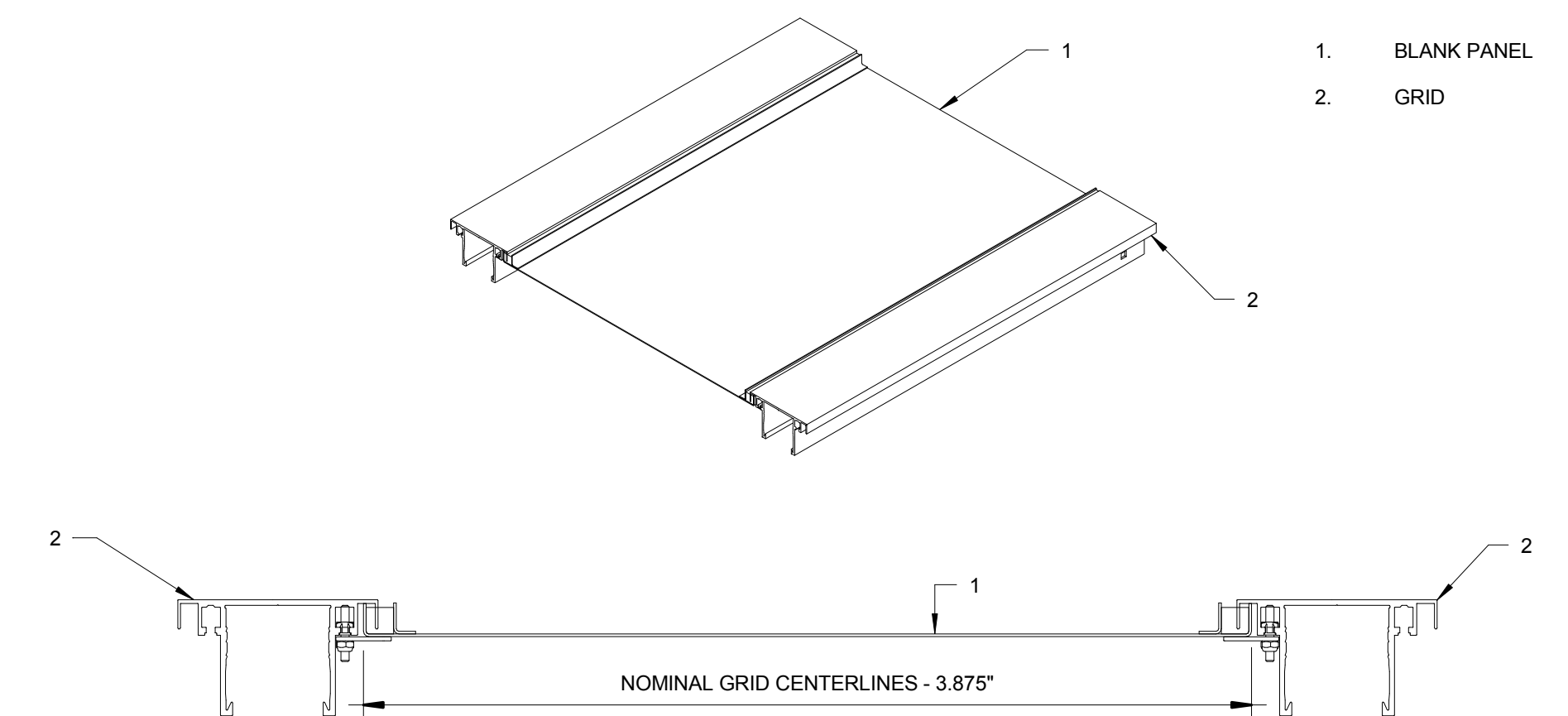
4 WEST ELEVATION  
 1/2" = 1'-0"



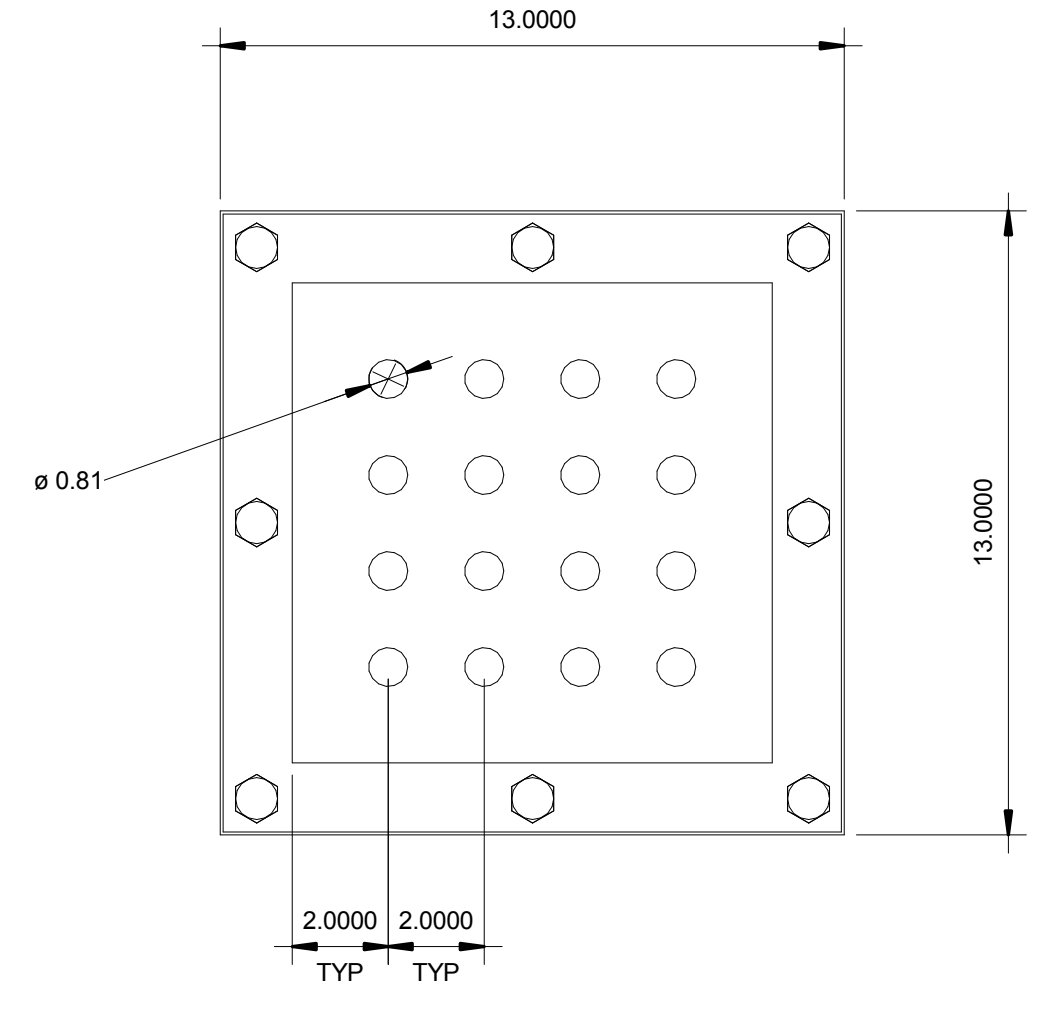
5 MODULE LAYOUT  
 1/2" = 1'-0"



6 TYPICAL ACCESS PANEL  
 1" = 1'-0"



7 TYPICAL BLANK PANEL  
 1" = 1'-0"



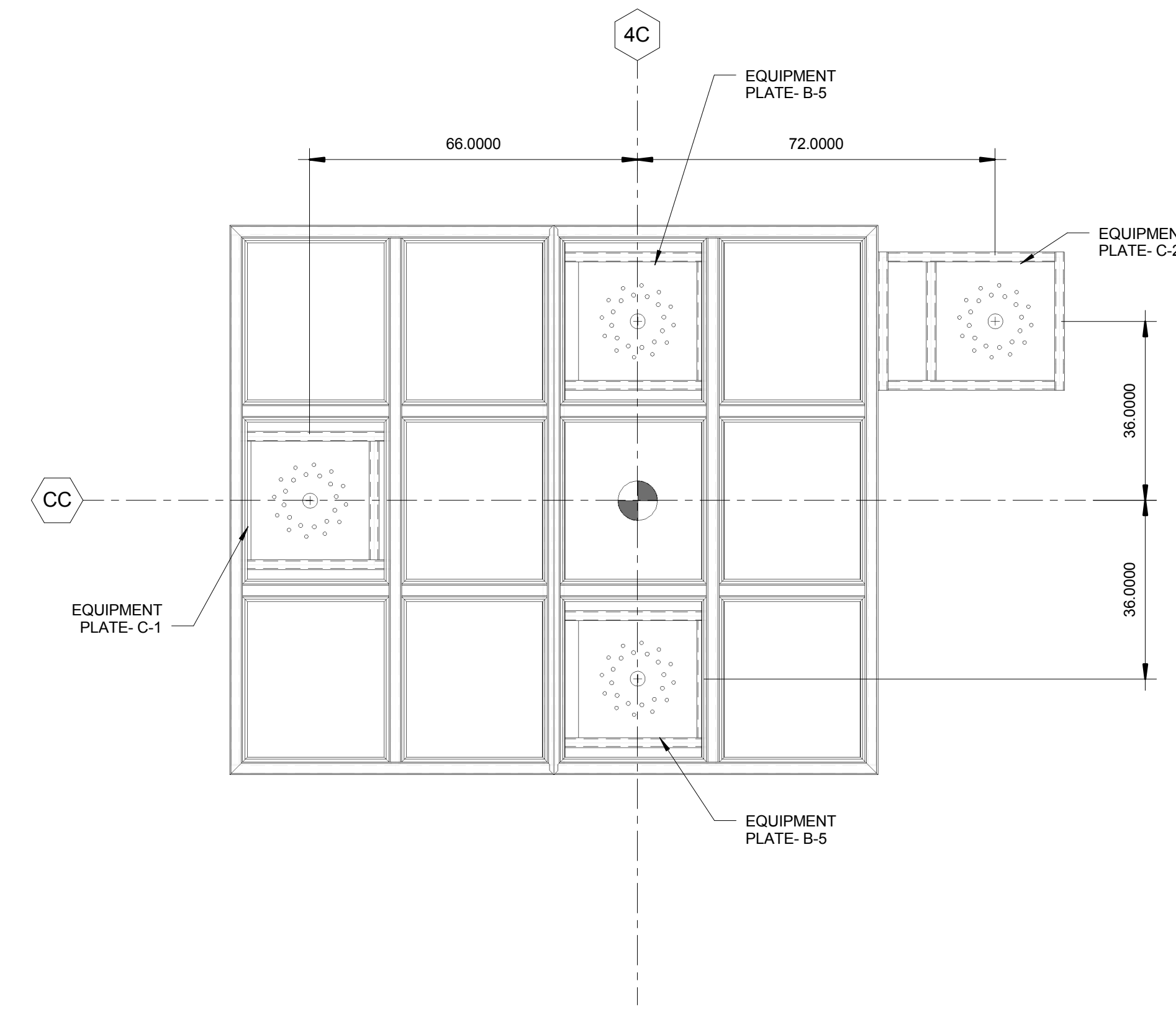
8 MED GAS PLATE  
 3" = 1'-0"

FULL SIZE DRAWING IS 30"x42"  
 DO NOT SCALE DRAWING

|   |  |  |                     |               |
|---|--|--|---------------------|---------------|
| REV. NO.  | REVISION DESCRIPTION   | APPROVED                                     | DATE                | AS BUILT DATE |
| STAMP:  | <br><b>NORTEK</b><br>AIR SOLUTIONS<br>19855 SW 124th Ave<br>TUALATIN, OR 97062<br>Phone (503) 639-0113 Fax (503) 639-1296<br>www.nortekair.com |  |                     |               |
| THIS DRAWING IS THE PROPERTY OF HUNTAIR CLEANSUITE AND CAN NOT BE REPRODUCED IN WHOLE OR IN PART, NOR DELIVERED TO OTHERS WITHOUT THE EXPRESS WRITTEN PERMISSION OF HUNTAIR CLEANSUITE. |  | HOSPITAL NAME_OR<br><br><b>MODULE LAYOUT</b> |                     |               |
| HOSPITAL NAME<br>HOSPITAL NAME<br>ADDRESS<br>CITY, STATE ZIP  |  | FILE NAME<br>XX-XXXX                         | DRAWING NO.<br>M2.0 | WORK NO.      |
| APPROVALS   | DATE   | FILE NAME                                    | DRAWING NO.         | WORK NO.      |
| DESIGNER  |  | OLD FILE NAME                                | ROOT SCALE          | DRAWING SCALE |
| CHECKED   |  |  | 1 : 1               | As indicated  |
| DESIGNCHECK   |  |  |                     |               |
| SAFETY  |  |  |                     |               |
| PLANNING  |  |  |                     |               |
| ENGINEERING   |  |  |                     |               |
| APPROVED  |  |  |                     |               |
| REV CODE  |  |  |                     |               |

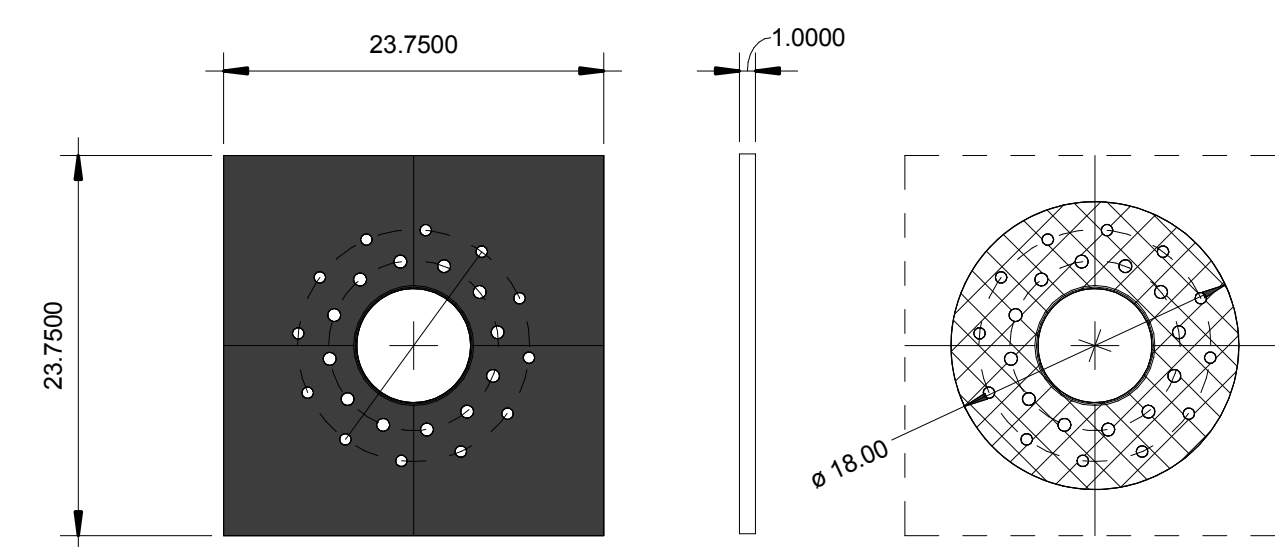
INDICATES ISO CENTER

| Boom Plate Schedule |           |              |       |                             |                          |                        |
|---------------------|-----------|--------------|-------|-----------------------------|--------------------------|------------------------|
| Count               | Type Mark | Manufacturer | Model | Description                 | Plate Mount Height (FFC) | Comments               |
| 4                   | B5,C1,C2  | STERIS       |       | SINGLE MOUNT STANDARD PLATE | 5.2500                   | 23.7500x23.7500x1.0000 |



1 BOOM PLATE SCHEDULE  
1/2" = 1'-0"

2 BOOM LAYOUT  
1/2" = 1'-0"



3 STERIS EQUIPMENT PLATE  
1" = 1'-0"

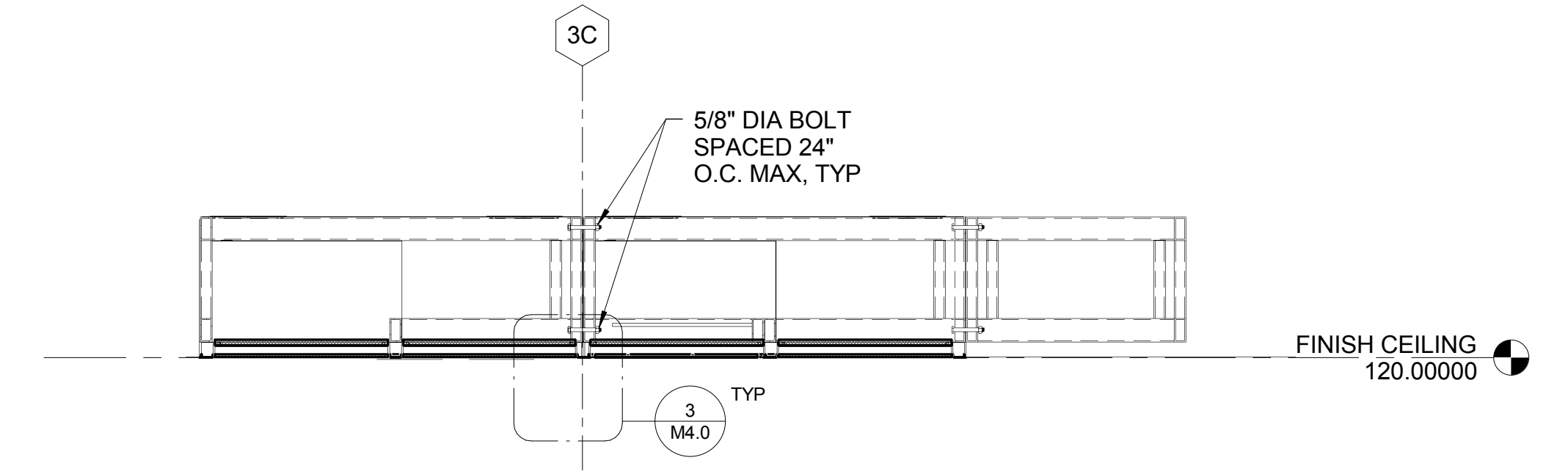
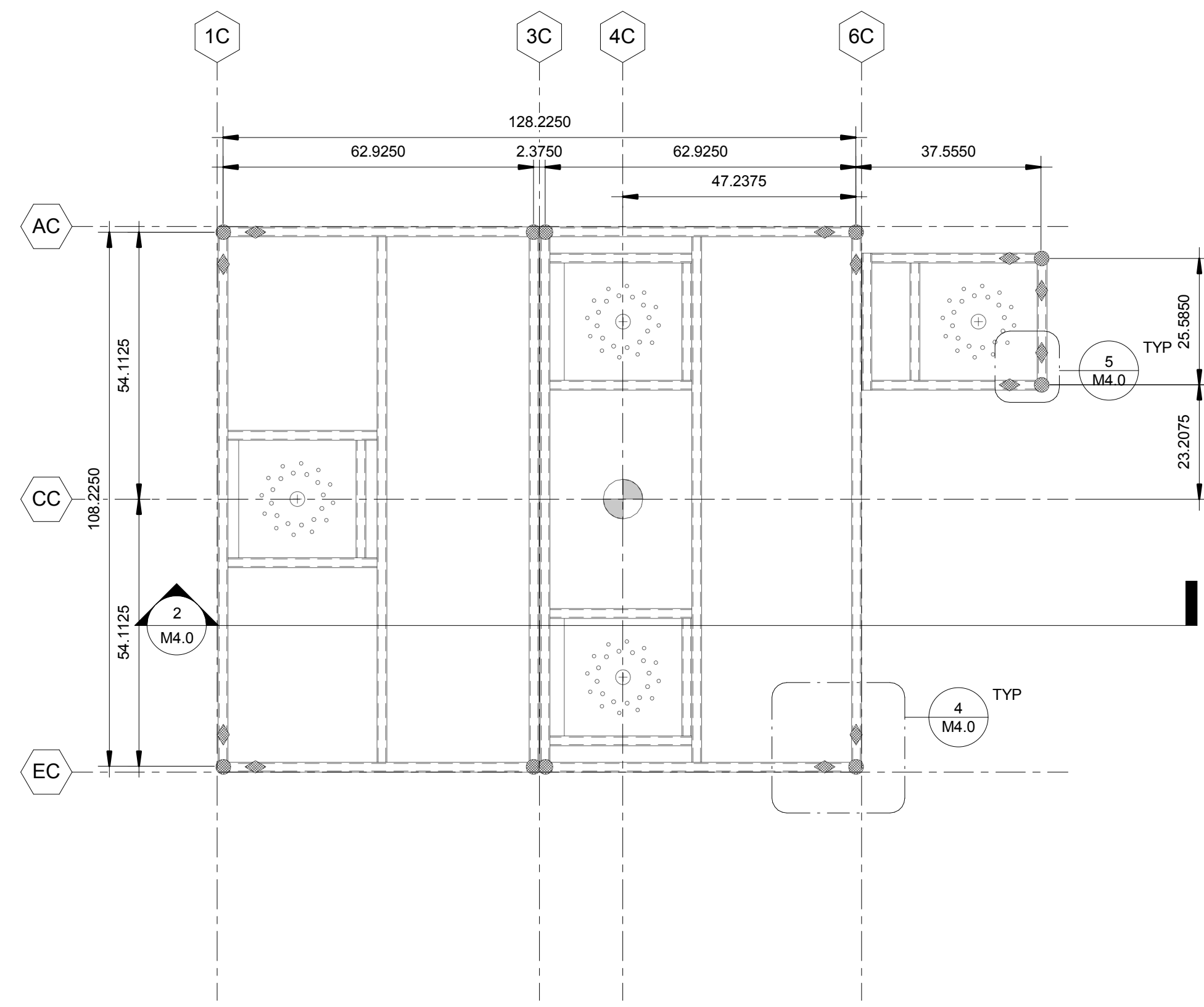
FULL SIZE DRAWING IS 30"x42"  
DO NOT SCALE DRAWING

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|--|----------------------|------------------|-------------|---------------|
| REV. NO.   | REVISION DESCRIPTION | APPROVED         | DATE        | AS BUILT DATE |
| STAMP:   |                      |                  |             |               |
| <p>19855 SW 124th Ave<br/>TUALATIN, OR 97062<br/>Phone (503) 639-0113 Fax (503) 639-1296<br/>www.nortekair.com</p>   |                      | HOSPITAL NAME_OR |             |               |
|  |                      | EQUIPMENT LAYOUT |             |               |
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| APPROVALS  | DATE                 | HOSPITAL NAME    |             |               |
| DESIGN   |                      | HOSPITAL NAME    |             |               |
| CHECKED  |                      | ADDRESS          |             |               |
| DWG/CHECK  |                      | CITY, STATE ZIP  |             |               |
| SAFETY   |                      |                  |             |               |
| PLANNING   |                      |                  |             |               |
| ENGINEERING  |                      | FILE NAME        | DRAWING NO. |               |
| APPROVED   |                      | XX-XXXX          | M3.0        |               |
| REV CODE   |                      | OLD FILE NAME    | REV SCALE   | DRAWING SCALE |
|  |                      |                  | 1 : 1       | As indicated  |

- NOTES:
- GRAVITY SUPPORT AND SEISMIC SUPPORT PROVIDED BY OTHERS. SEE PLAN AND KEY NOTES FOR CONNECTION HOLE DIAMETER AND LOCATIONS
  - SEISMIC KICKER HOLES PROVIDED UPON REQUEST TO EACH INDIVIDUAL MODULE CORNER

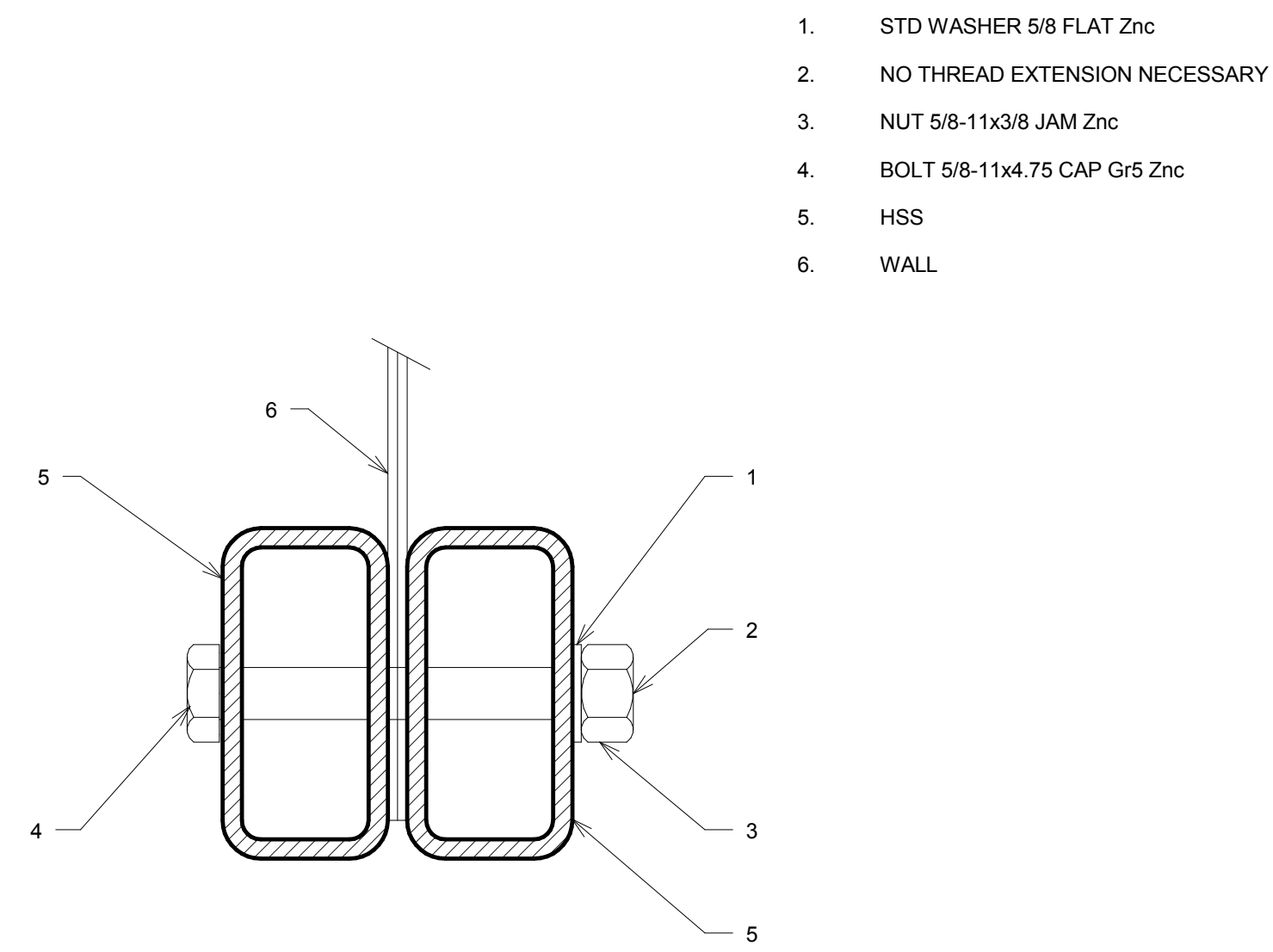
KEY NOTE

- INDICATES GRAVITY SUSPENSION POINT (.688" DIA HOLE)
- ◆ INDICATES SEISMIC KICKER LOCATIONS (.563" DIA HOLE)
- ⊙ INDICATES ISO CENTER

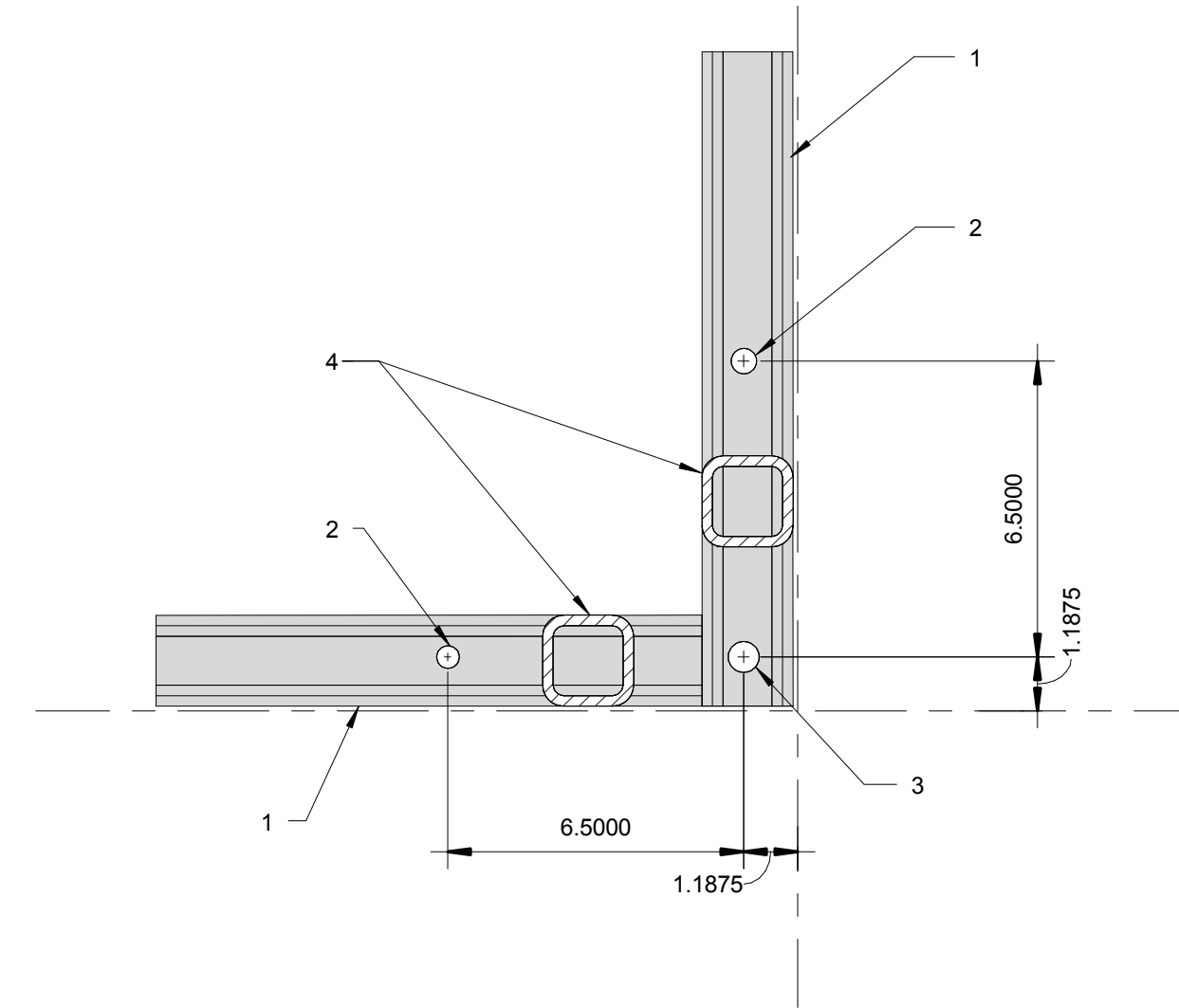


1 STRUCTURAL LAYOUT / SUSPENSION POINTS  
1/2" = 1'-0"

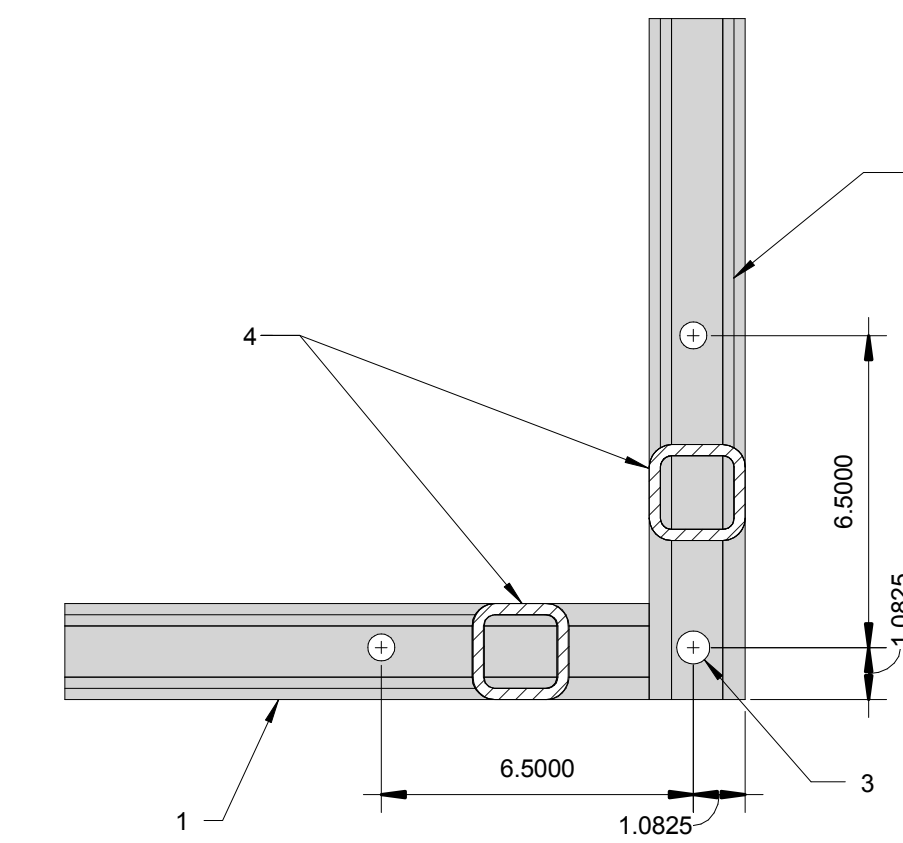
2 MODULE TO MODULE CONNECTION DETAIL  
1/2" = 1'-0"



- STD WASHER 5/8 FLAT Zinc
- NO THREAD EXTENSION NECESSARY
- NUT 5/8-11x3/8 JAM Zinc
- BOLT 5/8-11x4.75 CAP Gr5 Zinc
- HSS
- WALL



- HSS4x2
- SEISMIC HOLE
- SUSPENSION HOLE
- HSS2x2 VERTICAL



- HSS4x2
- SUSPENSION HOLE
- HSS2x2 VERTICAL

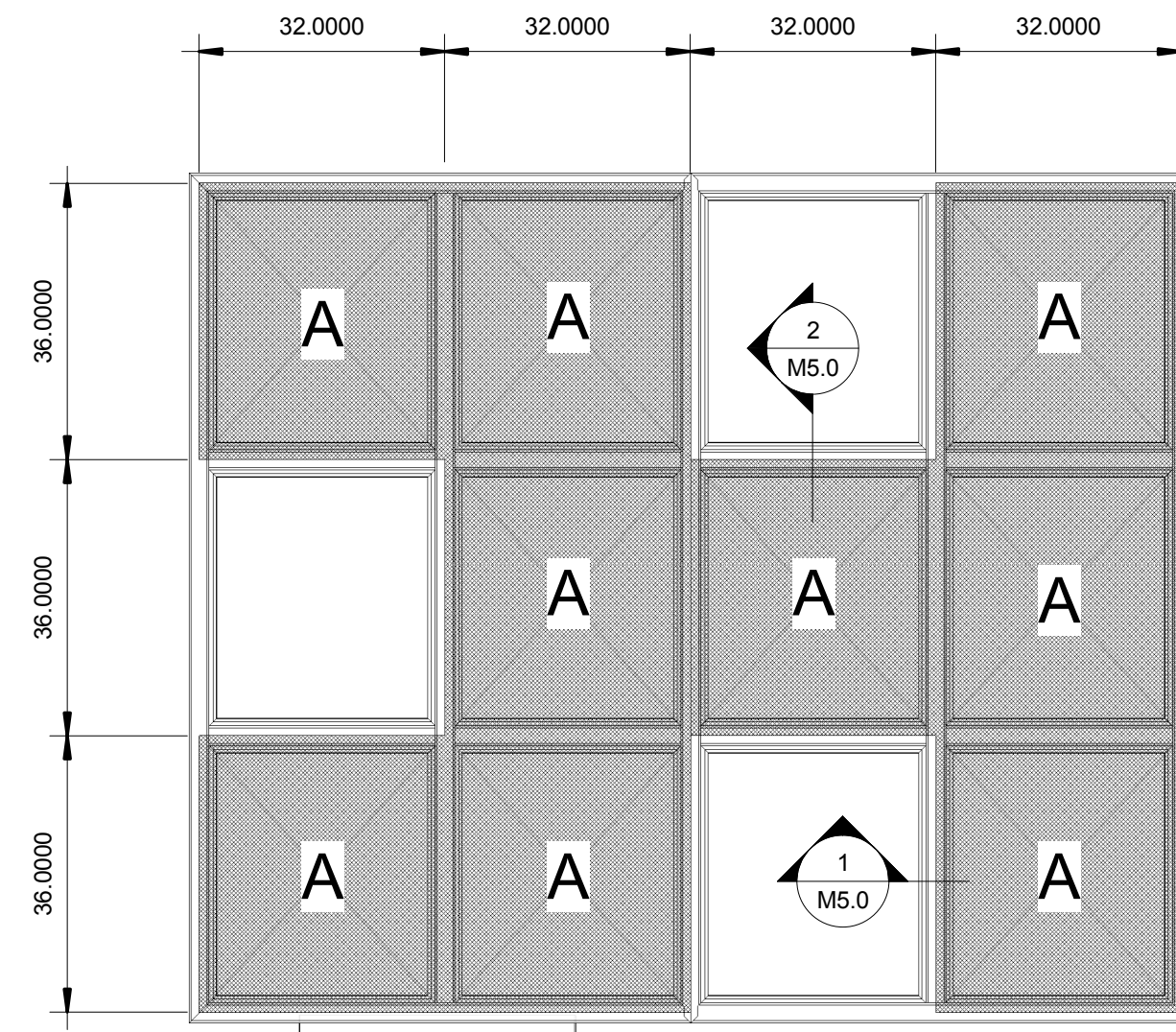
3 MODULE TO MODULE CONNECTION DETAIL  
6" = 1'-0"

4 CORNER SUSPENSION POINT  
3" = 1'-0"

5 TRUSS CORNER SUSPENSION POINT DETAIL  
3" = 1'-0"

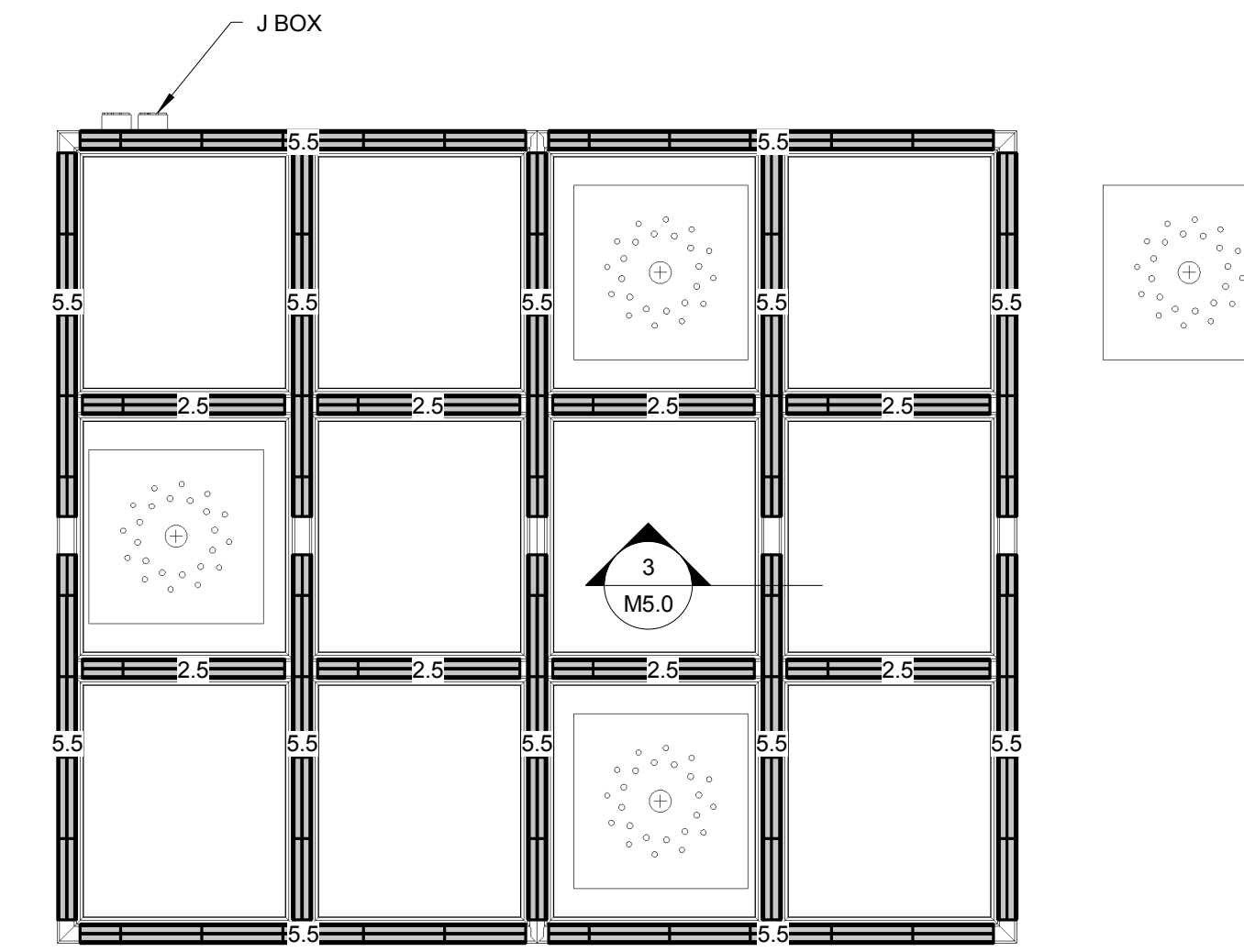
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| REV. NO.   | REVISION DESCRIPTION | APPROVED      | DATE         | AS BUILT DATE |
| STAMP:   |                      |               |              |               |
|  |                      |               |              |               |
| 19855 SW 124th Ave<br>TUALATIN, OR 97062<br>Phone (503) 639-0113 Fax (503) 639-1296<br>www.nortekair.com |                      |               |              |               |
| HOSPITAL NAME_ OR  |                      |               |              |               |
| <b>STRUCTURAL LAYOUT</b>   |                      |               |              |               |
| HOSPITAL NAME<br>HOSPITAL NAME<br>ADDRESS<br>CITY, STATE ZIP   |                      |               |              |               |
| APPROVALS  |                      | DATE          |              |               |
| DESIGN   |                      |               |              |               |
| CHECKED  |                      |               |              |               |
| DESIGN CHECK   |                      |               |              |               |
| SAFETY   |                      |               |              |               |
| PLANNING   |                      |               |              |               |
| ENGINEERING  |                      |               |              |               |
| APPROVED   |                      |               |              |               |
| REV CODE   |                      |               |              |               |
| FILE NAME  | XX-XXXX              | DRAWING NO.   | M4.0         |               |
| OLD FILE NAME  |                      | PROJECT SCALE | 1 : 1        | DRAWING SCALE |
|  |                      |               | As indicated | WORK IN NO.   |

| Air Filter/ Diffuser Schedule |       |             |          |              |          |
|-------------------------------|-------|-------------|----------|--------------|----------|
| Type Mark                     | Count | Description | Model    | Manufacturer | Comments |
| A                             | 9     |             | DIFFUSER | HUNTAIR      |          |
| Grand total: 9                |       |             |          |              |          |



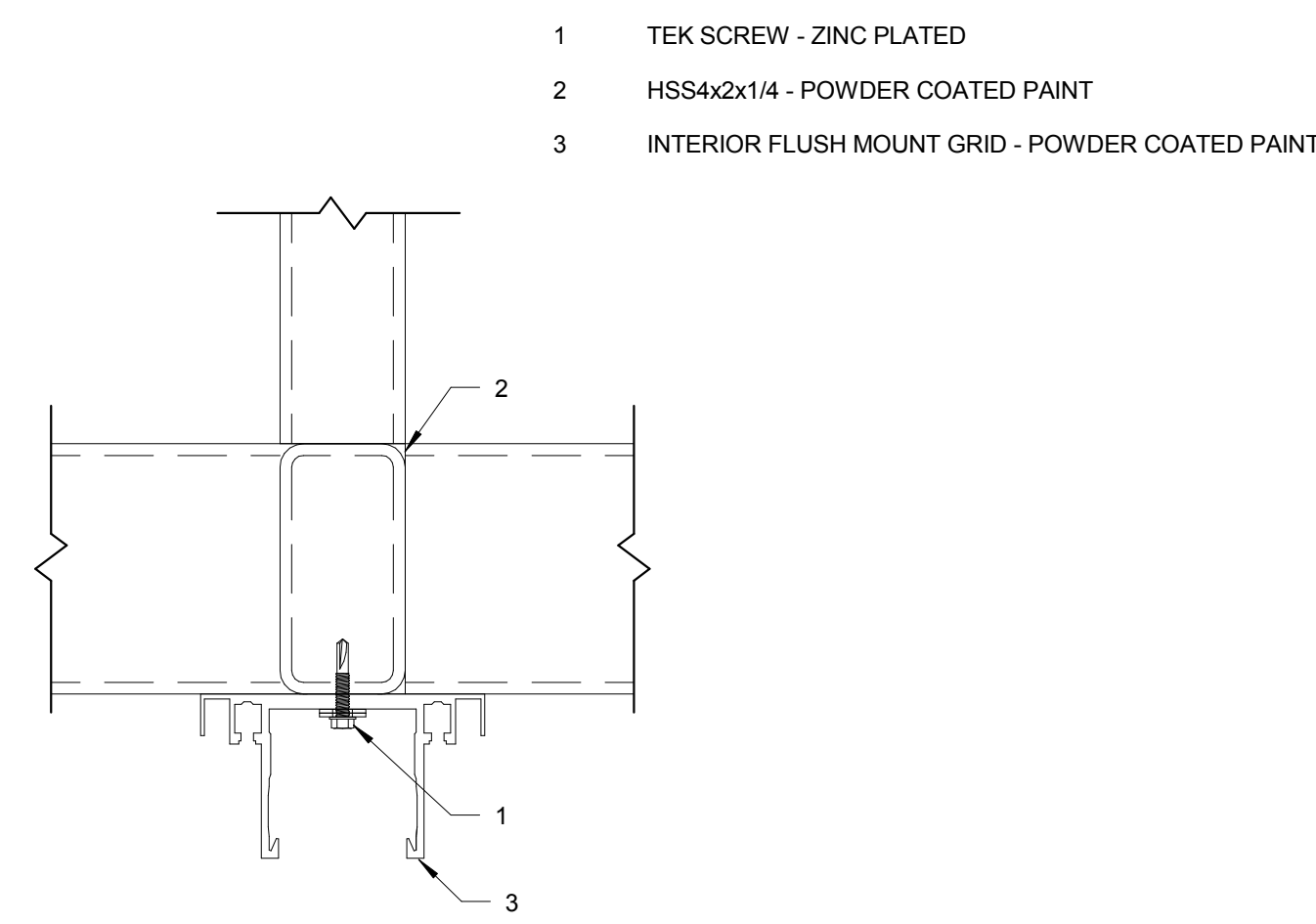
### SYSTEM SIZING

CFM: 1800      CFM: 2520  
 DIFA: 72 SF    DIFA: 72 SF  
 VELOCITY: 25 FPM    VELOCITY: 35 FPM



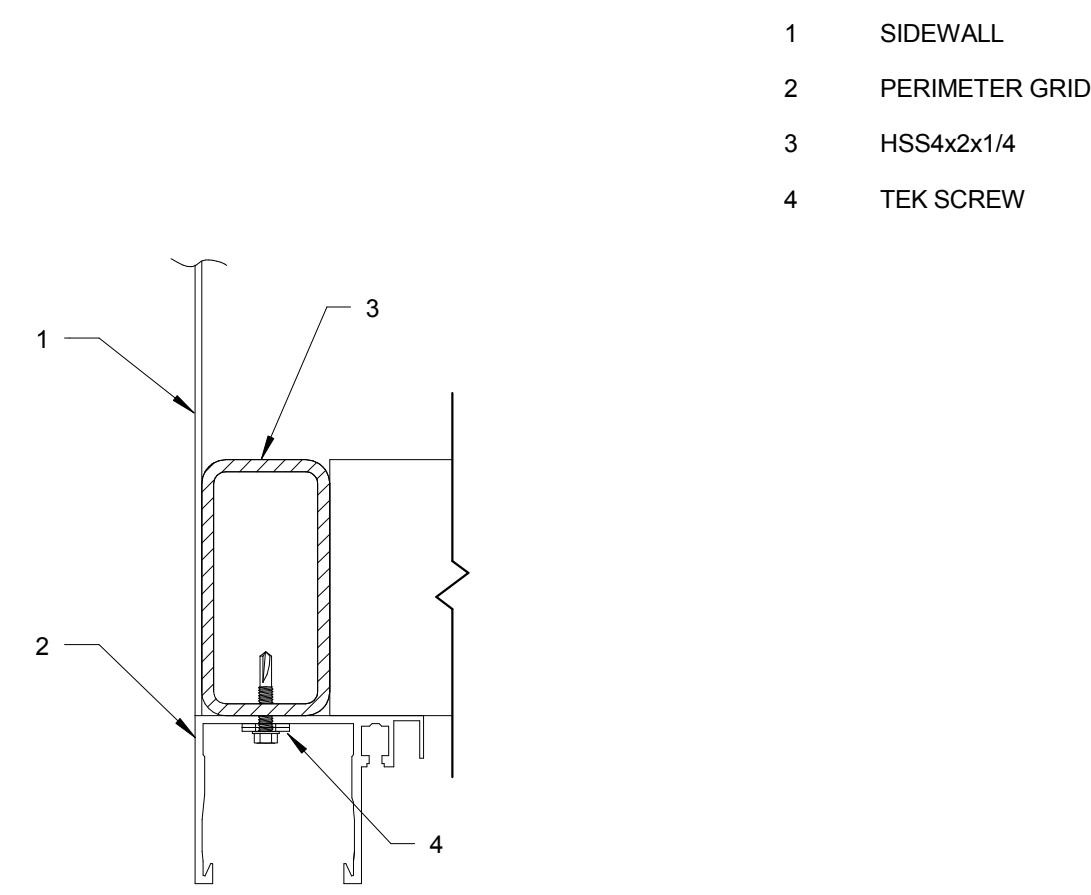
- NOTE:
- LED LENS IS CLEAR-DIFFUSER
  - LIGHTING ON (2) CIRCUITS (PERIMETER AND INTERIOR)  
 (2) J-BOXES PROVIDED PER CIRCUIT  
 (1) 120/277VAC POWER  
 (1) 0-10V LED DIMMING CONTROL
  - LOW VOLTAGE AND ELECTRICAL WIRING FOR BOOMS ARE WIRED DIRECTLY TO BOOM AND PROVIDED BY OTHERS
  - PERIMETER WATTAGE = 298.1  
 INTERIOR WATTAGE = 359.0

5 GRID LAYOUT  
 1/2" = 1'-0"

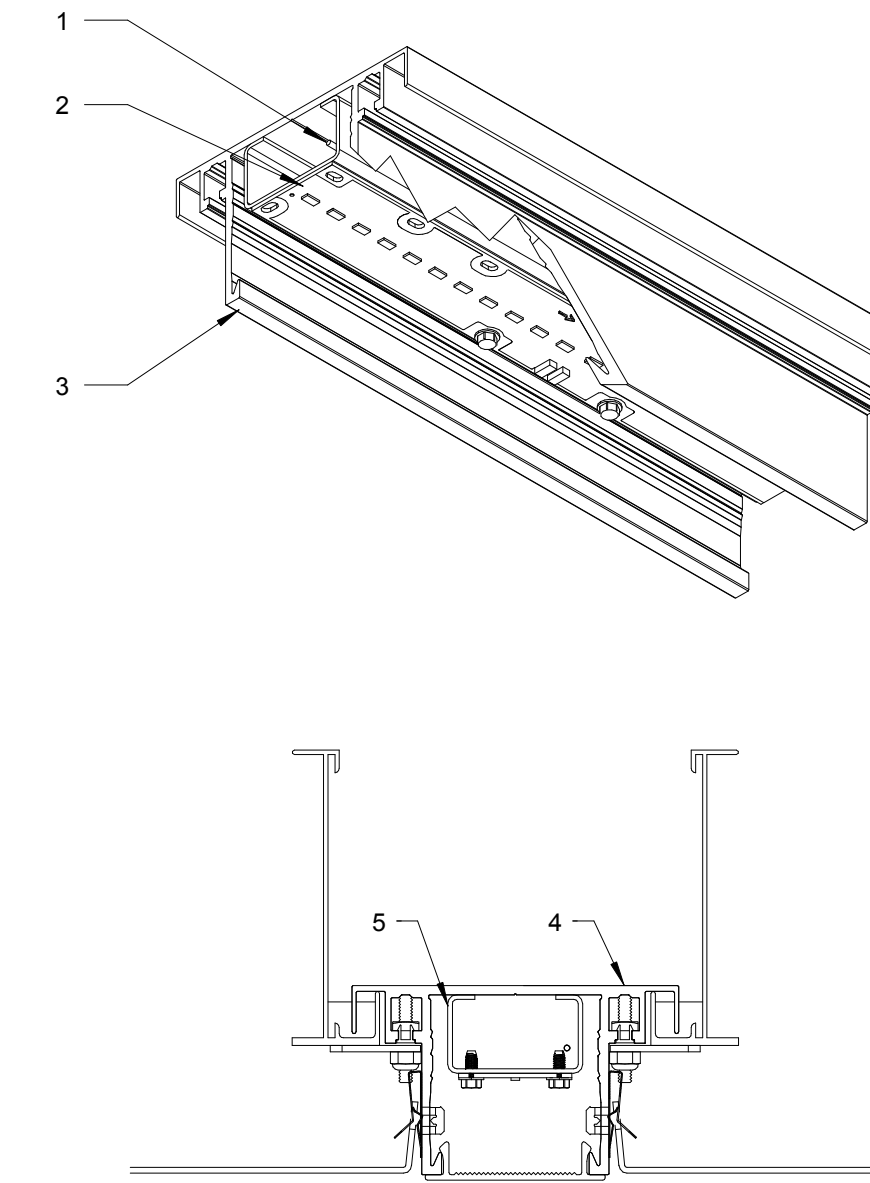


1 TYPICAL TUBE TO GRID ATTACHMENT-INTERIOR  
 1" = 1'-0"

6 LIGHTING LAYOUT  
 1/2" = 1'-0"



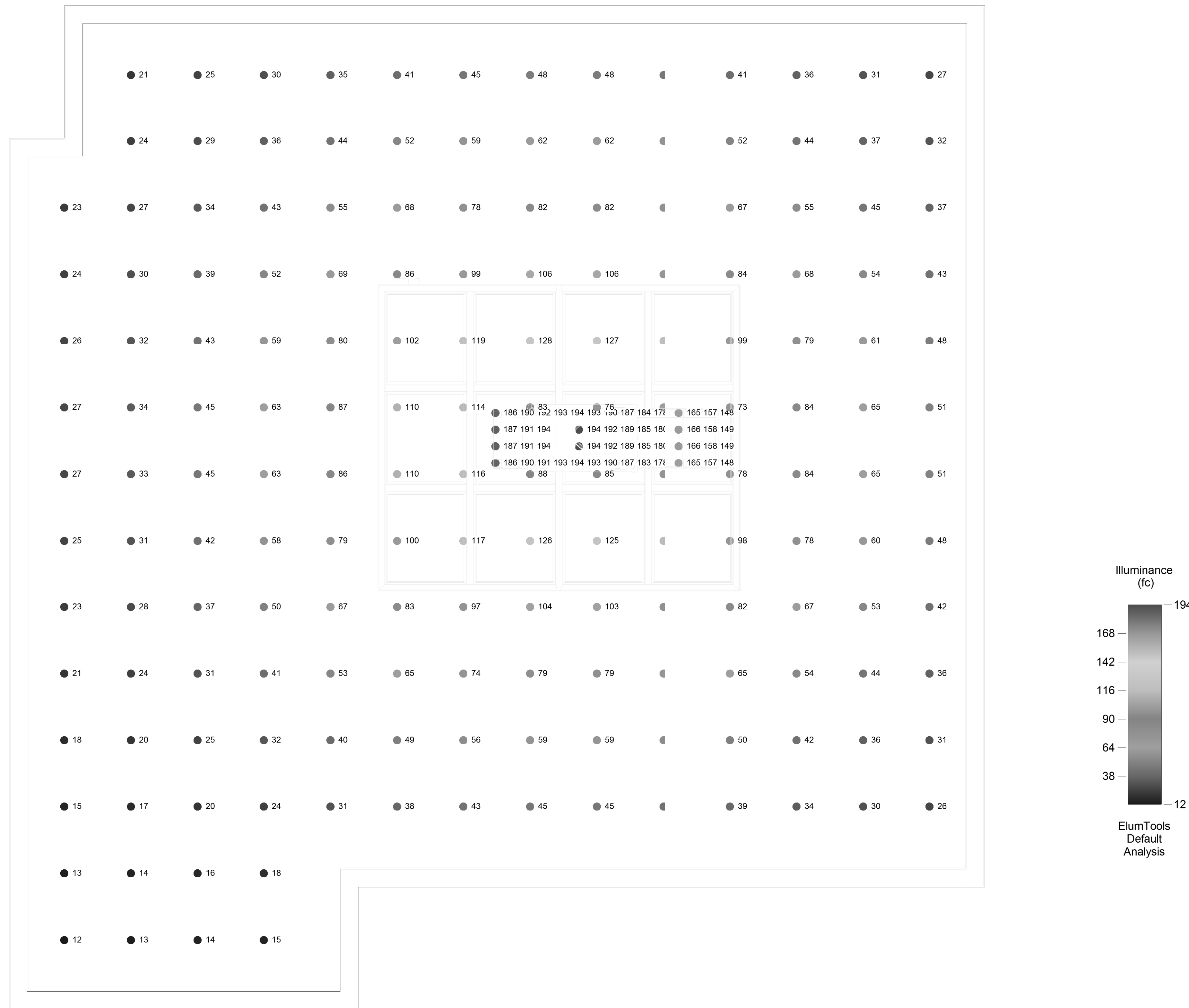
2 TUBE TO GRID ATTACHMENT-EXTERIOR  
 1" = 1'-0"



3 TYP LED LIGHTING DETAIL  
 1/2" = 1'-0"

- LIGHT FIXTURE
- LED STRIP
- LENS CLIP IN EXTRUSION
- 2.6 BOTTOM LOAD GRID EXTRUSION
- LED MOUNTING STRUT

|   |                      |               |                      |               |
|---|----------------------|---------------|----------------------|---------------|
| REV. NO.  | REVISION DESCRIPTION | APPROVED      | DATE                 | AS BUILT DATE |
| STAMP:  |                      |               |                      |               |
| <br><b>NORTEK</b><br><b>AIR SOLUTIONS</b><br>19855 SW 124th Ave<br>TUALATIN, OR 97062<br>Phone (503) 639-0113 Fax (503) 639-1296<br>www.nortekair.com |                      |               |                      |               |
| HOSPITAL NAME_OR  |                      |               |                      |               |
| <b>GRID ASSEMBLY &amp; ELEC</b>   |                      |               |                      |               |
| HOSPITAL NAME<br>HOSPITAL NAME<br>ADDRESS<br>CITY, STATE ZIP  |                      |               |                      |               |
| APPROVALS   |                      | DATE          |                      |               |
| DESIGN  |                      |               |                      |               |
| CHECKED   |                      |               |                      |               |
| DESIGN CHECK  |                      |               |                      |               |
| SAFETY  |                      |               |                      |               |
| PLANNING  |                      |               |                      |               |
| ENGINEERING   |                      |               |                      |               |
| APPROVED  |                      |               |                      |               |
| REV CODE  |                      |               |                      |               |
| FILE NAME   | XX-XXXX              | DRAWING NO.   | M5.0                 |               |
| OLD FILE NAME   |                      | PROJECT SCALE | 1 : 1                | DRAWING SCALE |
|   |                      |               | As indicated         | WORK IN NO.   |
|   |                      | Author        | 12/20/17 10:25:43 AM |               |



### GENERAL NOTES

1. THESE RESULTS ARE ESTIMATED.
2. LUMINAIRE HEIGHT : 10 FT
3. CALCULATION GRID HEIGHT ABOVE THE FLOOR: 3 FT (STANDARD TABLE HEIGHT)
4. EXTERNAL LIGHTING NOT INCLUDED.
5. SHARED LIGHT IS NOT INCLUDED.
6. WALL LOCATIONS ARE APPROXIMATE.
7. LIGHT LOSS FACTOR: 0.91
8. ONLY DIRECT LIGHT IS CALCULATED.

### DISCLAIMER

CALCULATIONS HAVE BEEN PERFORMED ACORDING TO IES STANDARDS AND GOOD PRACTICE. SOME DIFFERENCES BETWEEN MEASURED VALUES AND CALCULATED RESULTS MAY OCCUR DUE TO TOLERANCES IN CALCULATION METHODS, TESTING PROCEDURES, COMPONENT PERFORMANCE, MEASUREMENT TECHNIQUES AND FIELD CONDITIONS SUCH AS VOLTAGE AND TEMPERATURE VARIATIONS. INPUT DATA USED TO GENERATE THE ATTACHED CALCULATIONS SUCH AS ROOM DIMENSIONS, REFLECTANCES, FURNATURE AND ARCHITECTURAL ELEMENTS SIGNIFICANTLY AFFECT THE LIGHTING CALCULATIONS. IF THE REAL ENVIRONMENT CONDITIONS DO NOT MATCH THE INPUT DATA, DIFFERENCES WILL OCCUR BETWEEN MEASURED VALUES AND THE CALCULATED VALUES.

| Revit Categories                    |               | ElumTools Material Properties |                 |       |             |               |             |             |           |                 |                                     |                             |                            |
|-------------------------------------|---------------|-------------------------------|-----------------|-------|-------------|---------------|-------------|-------------|-----------|-----------------|-------------------------------------|-----------------------------|----------------------------|
| Category Override                   | Category Name | Category Type                 | Surface Type    | Color | Reflectance | Transmittance | Mesh Level  | Color Bleed | Luminance | Luminance Color | Luminaire Luminous                  | Specularity (Raytrace Only) | Glossiness (Raytrace Only) |
| Category Type: Common (3)           |               |                               |                 |       |             |               |             |             |           |                 |                                     |                             |                            |
| <input checked="" type="checkbox"/> | Ceilings      | Common                        | Opaque, 1-sided |       | 0.80        | 0.00          | 0 (Default) |             | 1.00      | 0               | <input checked="" type="checkbox"/> | 0.00                        | 0.00                       |
| <input checked="" type="checkbox"/> | Floors        | Common                        | Opaque, 1-sided |       | 0.40        | 0.00          | 0 (Default) |             | 1.00      | 0               | <input checked="" type="checkbox"/> | 0.00                        | 0.00                       |
| <input checked="" type="checkbox"/> | Walls         | Common                        | Opaque, 1-sided |       | 0.70        | 0.00          | 0 (Default) |             | 1.00      | 0               | <input checked="" type="checkbox"/> | 0.00                        | 0.00                       |

| ElumTools General Use Illuminance Results |                |                                    |         |         |         |
|---|----------------|------------------------------------|---------|---------|---------|
| Project Name                              | Project Number | Calculation Points Name            | Average | Minimum | Maximum |
| HOSPITAL_NAME_OR                          | XX-XXXX        | STERIS 5085 General Surgical Table | 180 fc  | 148 fc  | 194 fc  |
| HOSPITAL_NAME_OR                          | XX-XXXX        | OR 1                               | 58 fc   | 12 fc   | 128 fc  |

| LIGHTING FIXTURE SCHEDULE |                         |       |                         |                  |         |  |                  |                                  |
|---------------------------|-------------------------|-------|-------------------------|------------------|---------|--|------------------|----------------------------------|
| Manufacturer              | Model                   | Count | Total Light Loss Factor | Luminaire Lumens | Wattage | Photometric File Data  | OmniClass Number | OmniClass Title                  |
| Huntair                   | 26-LED03-0-188-WOR-WPCL | 98    | 0.91                    | 540 lm           | 0 W     | IESNA LM-63-2002<br>[TEST]TL85091<br>[TEST]INDEPENDENT TESTING LABORATORIES, INC.<br>[ISSUE DATE]07/14/15<br>[MANUFACTURER]HUNT AIR CLEANPAK<br>[LUMCAT]26-LED03-0-188-WOR-WPCL<br>[LUMINAIRE]EXTRUDED METAL HOUSING WITH WHITE PAINTED GENERAL INTERIOR<br>[MOUNT]NISHI FABRICATED SEMI-SPECULAR METAL CIRCUIT BOARD MOUNT, 1<br>[MOUNT]WHITE CIRCUIT BOARD WITH 22 LEADS, EXTRUDED TRANSLUCENT LINEAR<br>[MOUNT]PRISMATIC PLASTIC LENS, LENS PRISMS IN AND PARALLEL WITH LENGTH<br>[MOUNT]OF HOUSING<br>[LAMP]TWENTY-TWO WHITE MULTI-CHIP LIGHT EMITTING DIODES (LEDS),<br>[MOUNT]VERTICAL BASE-UP POSITION.<br>[NOTE]THIS REPORT WAS PRORATED FROM ITL TEST NUMBER 80138 WHICH WAS<br>[MOUNT]A 4'x8' LED LUMINAIRE. THE DATA WAS DIVIDED BY FOUR TO<br>[MOUNT]REPRESENT A 1' LUMINAIRE WITH 22 LEADS. ACTUAL PERFORMANCE MAY<br>[MOUNT]VARY.<br>[OTHER TEST PROCEDURE]IESNA LM-79-08<br>[OTHER TEST DISTANCE]35.0 FEET<br>[ABSOLUTE LUMENS]540<br>[TL]NONE<br>22 -1 1 37 5 1 1 0.208333 0.973958 0.005208<br>1 1 0<br>0 2.5 5 7.5 10 12.5 15 17.5 20 22.5 25 27.5 30 32.5 35 37.5 40 42.5 45 47.5 50<br>52.5 55 57.5 60 62.5 65 67.5 70 72.5 75 77.5 80 82.5 85 87.5 90<br>0 22.5 45 67.5 90<br>228 228 227 225 222 219 216 211 208 203 194 187 180 172 164 155 146 138 129 120<br>111 102 93 85 77 68 60 53 45 37 30 23 17 11 6 2 0<br>228 228 224 222 220 217 213 208 203 197 190 183 176 168 160 152 144 135 127 118<br>109 101 93 84 76 68 60 53 45 38 31 24 18 13 8 4 2<br>228 227 226 224 221 217 213 208 202 195 188 181 173 165 157 148 140 131 123 114<br>108 97 89 82 74 66 59 52 45 38 32 25 20 14 10 6 4<br>228 228 226 224 221 216 211 205 200 193 185 177 169 160 152 143 134 125 117 108<br>100 92 85 77 70 63 56 49 43 37 31 25 20 15 11 8 5<br>228 227 225 223 219 215 210 204 198 190 183 175 166 158 149 140 131 123 114 106<br>98 90 83 75 68 62 55 49 42 36 31 25 20 16 12 8 6 | 23.80.70.11      | Luminaires for Internal Lighting |

1 LIGHTING CALCULATION  
1/2" = 1'-0"

|   |                      |               |       |               |
|---|----------------------|---------------|-------|---------------|
| REV. NO.  | REVISION DESCRIPTION | APPROVED      | DATE  | AS BUILT DATE |
| STAMP:  |                      |               |       |               |
|   |                      |               |       |               |
| 19855 SW 124th Ave<br>TUALATIN, OR 97062<br>Phone (503) 639-0113 Fax (503) 639-1296<br>www.nortekair.com      |                      |               |       |               |
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| LIGHTING CALCULATIONS   |                      |               |       |               |
| APPROVALS DATE<br>DRAWN<br>CHECKED<br>CROSSCHECK<br>SAFETY<br>PLANNING<br>ENGINEERING<br>APPROVED<br>REV CODE |                      |               |       |               |
| FILE NAME   | XX-XXXX              | DRAWING NO.   | M6.0  |               |
| OLD FILE NAME   |                      | DRAWING SCALE | 1 : 1 | WORKING       |