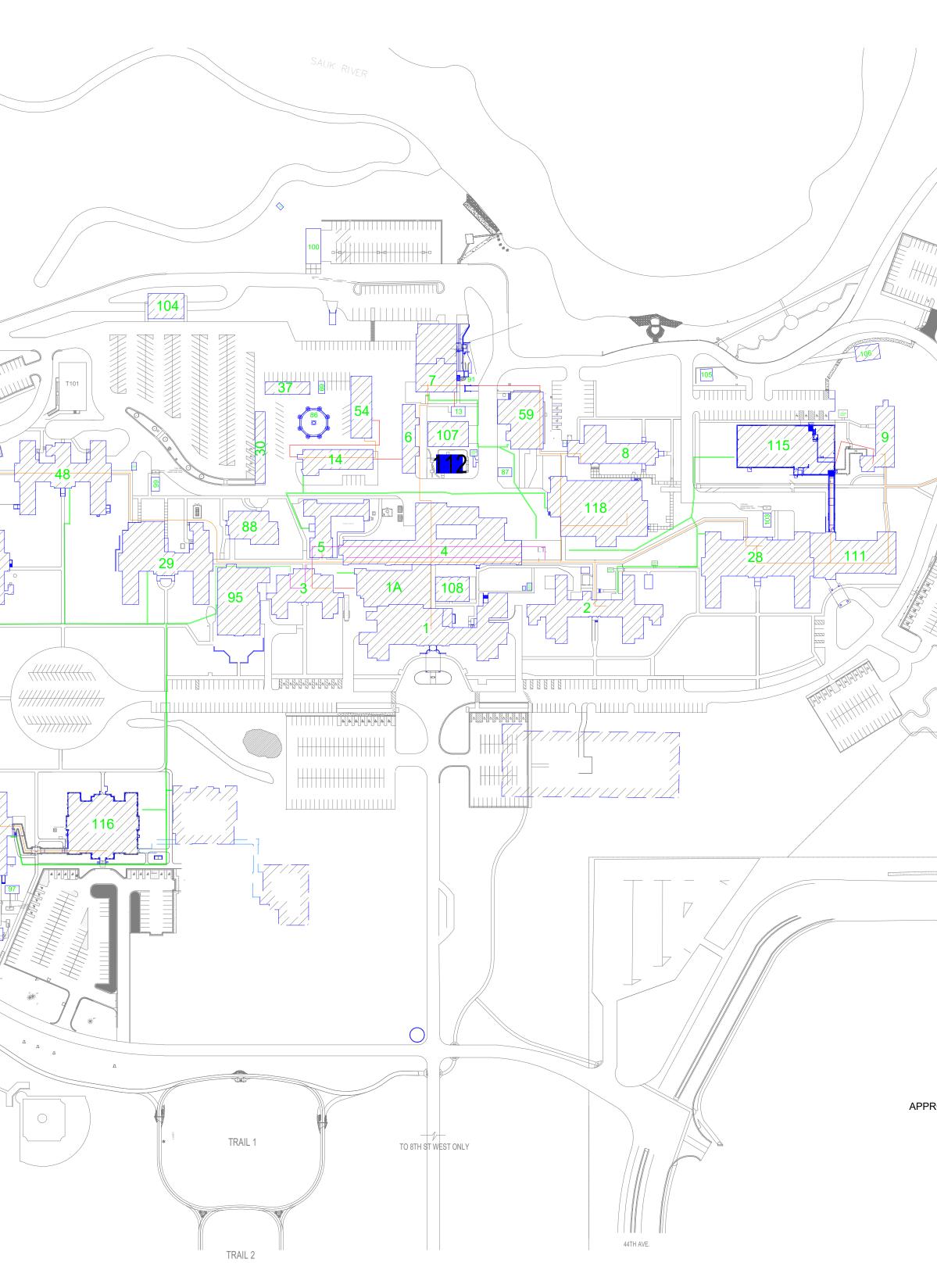
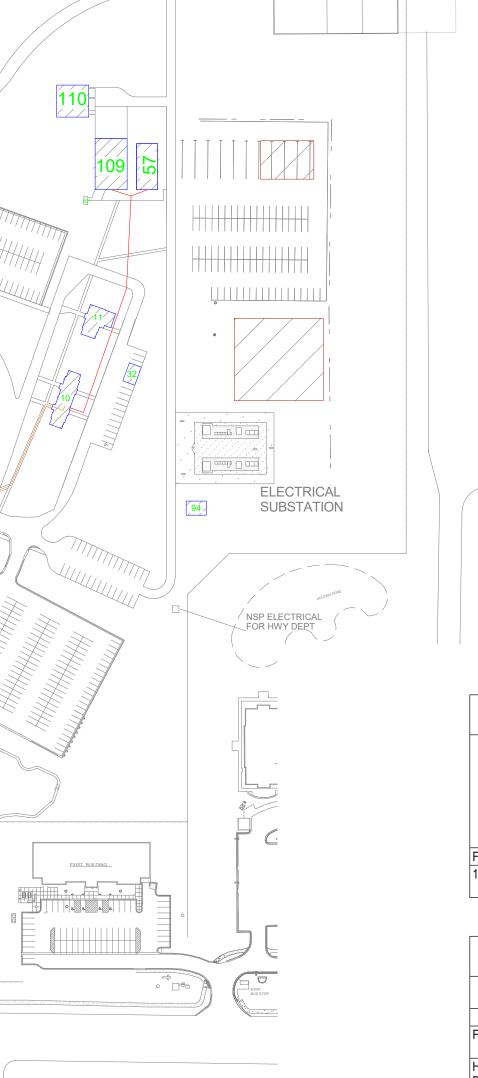
1 BUILC	3 DING 112	- EHRMINF	<sup>6</sup> RASTRU	JCTUR	BUPGRADES
B		St. Cloud VA H Main Campus, S			69  54    54  54    SEE 54-G000  13    6  13    5  12    KEY PLAN  1-50-0°
<section-header><section-header>    OWNER AND CONSULTANTS:    VA GRE VA GRE    VA GRE  VA GRE    VA GRE  CHARAM MARGER    COMMAN SERVER  CHARAM SERVER    COMMAN SERVER  CHARAM SERVER    COMMAN SERVER  CHARAM SERVER    COMMAN SERVER  CHARAM SERVER    COMMAN SERVER  STILLCOLUM SERVER    COMMAN SERVERSE  STILLCOLUM SERVER    COMMAN SERVER  CHARAM SERVERSE    PHONE  STILLCOLUM SERVERSE    COMMAN SERVERSE  CHARAM SERVERSE    PHONE  STILLCOLUM SERVERSE    COMMAN SERVERSE  CHARAM SERVERSE</section-header></section-header>	LEGEND VYY EXIST HERR ROUTE. INSIDE SEE TELECOM FIBER ROUTE. INSIDE SEE CIVIL BULDING OUTLINE VYY EXIST CORRIDOR OUTLINE VYY EXIST OUTLINE VYY EXIST OUTLI				
	ARCHITECT/ENGINEER OF RECORD ARCHITECT/ENGINEER OF RECORD ARCHITECT/ENGINEER ARCHITECT/ENGINE	SON  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.  APPROVED:  DATE:    Mouth, MN 55441  Typed or Printed Name: Tom Olesak  Date:  DATE:    Double of Printed Name: Tom Olesak  Date:  Date:	APPROVED: SERVICE LINE DIRECTOR  DATE:  APPROVED: SAFETY MANAGER  DATE    APPROVED: GEMS COORDINATOR  DATE:  APPROVED: CHIEF OF POLICE  DATE	E:  APPROVED: EMS MANAGER  DATE:  APPROVED: DIRECTOR FMS    E:  APPROVED: M/O MANAGER  DATE:  APPROVED: ASSOCIATE DIRECTOR    E:  APPROVED: PROJECTS SECTION MANAGER  DATE:  APPROVED: NURSE EXECUTIVE    E:  APPROVED: ASSISTANT CHIEF ENGINEER  DATE:  APPROVED: CHIEF OF STAFF	DATE:  DRAWING TITLE    BUILDING 112 COVER SHEET &  EHRM INFRASTRUCTURE    DATE:  DATE:    DATE:  DEVICTION CALCENTER DIRECTOR    DATE:  DATE:    DATE:  DEVICTION    DATE:  DATE:    DATE:  DEVICTION    DATE:  DEVICTION <t< td=""></t<>





			HAZARDOU	S MATERIAL SCHEDULE
	ROOM		QUESTIONABLE HAZARDOUS	
LEVEL	NO.	ROOM NAME	ELEMENT	POSSIBI
	-			
FIRST FLOOR	112W	PLACEHOLDER	NONE	NONE
		BUILDING 112W		
HAZARDOUS MA	TERIALS M	AY BE ENCOUNTERED 1	THROUGHOUT THE DISTRIBUTION ROL	JTING THROUGH CEILING PLENUMS AND UTILITY
DISTURB QUEST	IONABLE H	AZARDOUS MATERIAL.		

			ICRA PHASE	CONSTRUC <sup>-</sup>	TION ROOM	SCHEE
	ROOM		CAI BLDG NAME /	CONSTRUCTION	INFECTION CONTROL	CONT
LEVEL	NO.	ROOM NAME	FUNCTION	PROJECT ACTIVITY	RISK GROUP	PROCEDUF
	•			•	•	
FIRST FLOOR	112W	PLACEHOLDER	GENERATOR BUILDING	TYPE A	GROUP 1	CLAS
		BUILDING 112W				
SEE GENERAL N	OTES SHEE	T FOR CONSTRUCTION	INFECTION CONTROL RISK	ASSESSMENT (ICRA) DE	SCRIPTIONS. TYPE, GRO	OUP AND CLA
		THE VA WILL BE MADE A		· · · · ·		
						-
			LEAK PREV	VENTION / D	IVERTER SC	HEDUI
	ROOM					
LEVEL	NO.	ROOM NAME	OVERHEAD LE	EAK DIVERTER AND DRA	IN PIPING	
						(



U.S. Department of Veterans Affairs Veterans Health Administration St. Cloud VA Health Care System

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ITROL		CONSTRUCTION ZONE /	DAY /				
JRE CLASS	SECTION	N OCCUPIED CONSTR NI					
ASS I CENTER OCCUPIED CONSTRUCTION DAY							
LASS SELECTED TO BEST OF DESIGN TEAM'S KNOWLEDGE.							
ILE							
LEAK PREVENTION BARRIER WATERPROOFING							

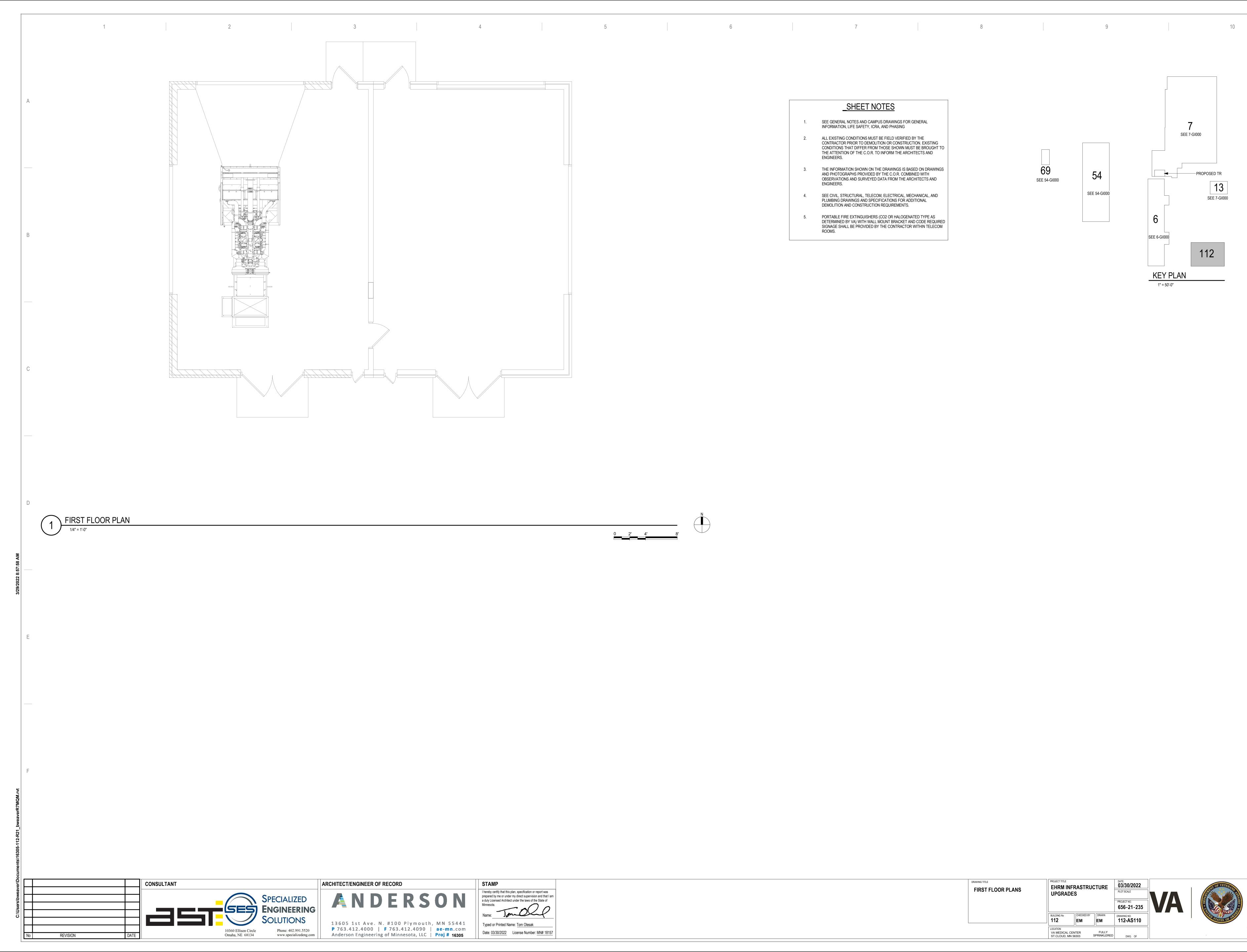
TUNNELS. INSTALLATION OF DISTRIBUTION SHALL NOT

DING 7 FOR TELECOM ROOM. SEE TELECOMMUNICATION 

REMARKS 

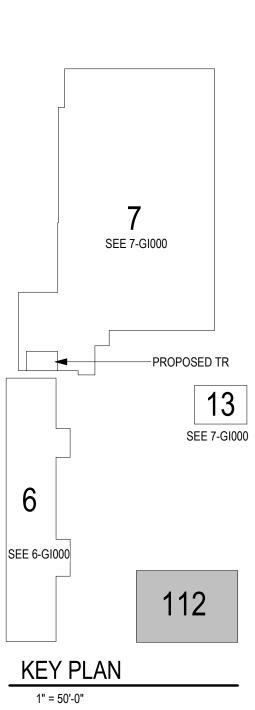
**7** SEE 7-GI000 PROPOSED TR

10



	_SHEET NOTES	]			
1.	SEE GENERAL NOTES AND CAMPUS DRAWINGS FOR GENERAL INFORMATION, LIFE SAFETY, ICRA, AND PHASING				
2.	ALL EXISTING CONDITIONS MUST BE FIELD VERIFIED BY THE CONTRACTOR PRIOR TO DEMOLITION OR CONSTRUCTION. EXISTING CONDITIONS THAT DIFFER FROM THOSE SHOWN MUST BE BROUGHT TO THE ATTENTION OF THE C.O.R. TO INFORM THE ARCHITECTS AND ENGINEERS.				
3.	THE INFORMATION SHOWN ON THE DRAWINGS IS BASED ON DRAWINGS AND PHOTOGRAPHS PROVIDED BY THE C.O.R. COMBINED WITH OBSERVATIONS AND SURVEYED DATA FROM THE ARCHITECTS AND ENGINEERS.		69 SEE 54-GI000	54	
4.	SEE CIVIL, STRUCTURAL, TELECOM, ELECTRICAL, MECHANICAL, AND PLUMBING DRAWINGS AND SPECIFICATIONS FOR ADDITIONAL DEMOLITION AND CONSTRUCTION REQUIREMENTS.			SEE 54-GI000	
5.	PORTABLE FIRE EXTINGUISHERS (CO2 OR HALOGENATED TYPE AS DETERMINED BY VA) WITH WALL MOUNT BRACKET AND CODE REQUIRED SIGNAGE SHALL BE PROVIDED BY THE CONTRACTOR WITHIN TELECOM ROOMS.				6 SEE 6-GIO
	ROOMS.				SE

FIRST FLOOR PLANS	PROJECT TITLE EHRM INFRASTRUCTURE UPGRADES		CTURE	DATE: 03/30/2022 PLOT SCALE PROJECT NO. 656-21-235	
	BUILDING No 112	CHECKED BY	DRAWN EM	DRAWING NO. 112-AS110	]
	LOCATION VA MEDICAL CE ST.CLOUD, MN		FULLY SPRINKLERED	DWG. OF	





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