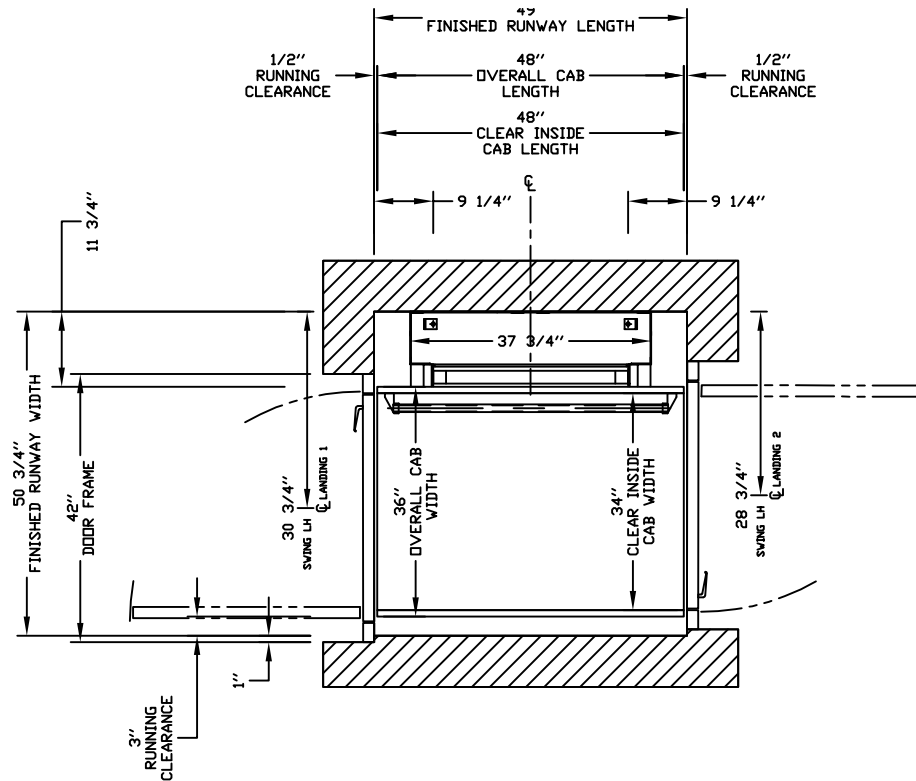
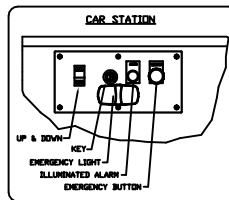


ELEVATION B-B



TYPICAL PLAN



**DRAWING APPROVAL:**

THIS DRAWING REFLECTS OUR INTERPRETATION OF THE INFORMATION PROVIDED BY THE DEALER ON THE ORDER FORM. THIS INFORMATION IS THE DEALER'S RESPONSIBILITY, AND IS THE BASIS FROM WHICH THIS LIFT IS DESIGNED AND MANUFACTURED. PLEASE INDICATE THE REQUESTED ACTION BY CHECKING ONE OF THE FOLLOWING BOXES AND SIGNING BELOW TO AUTHORIZE COMPLETION OF THIS ORDER.

- APPROVED WITH NO EXCEPTIONS  
MANUFACTURE PRODUCT AS PER DRAWING
- APPROVED WITH EXCEPTIONS, NO REAPPROVAL REQUIRED  
MAKE CHANGES AS NOTED, NO REAPPROVAL DRAWING REQUIRED
- CHANGE AS NOTED, REAPPROVAL REQUIRED  
MAKE CHANGES AS NOTED, SEND CORRECTED DRAWING FOR REAPPROVAL BEFORE MANUFACTURE

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CAUTION: ONCE THE DRAWING IS APPROVED, JOB CANCELLATION FEES WILL APPLY

**GENERAL ARRANGEMENT**  
ENCLOSED VERTICAL WHEELCHAIR PLATFORM LIFT

**OFFICE USE ONLY:**  
CONFIGURATION VERSION STAMP: 0.0  
MODULE VERSION STAMP: H-S-2.0

Part No. \_\_\_\_\_  
Variant No. 26568

CUSTOMER: MAINE ACCESSIBILITY CORPORATION  
PROJECT: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DATE: 02/14/13  
REVISION DATE: 02/14/13  
COMPLETED BY: 60164



JOB No. P-000000 SHEET No. 1 OF 4