Reviewed for Code Compliance
Inspections Division
Approved with Conditions

Date: 06/12/13

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:	M-S-2.0

CUSTOMER:	MAINE ACCESSIBILITY CORPORATION
PROJECT:	Dr. Cook
ADDRESS:	Portland
DATE:	02/14/13
REVISION DATE:	02/14/13
COMPLETED BY:	60164
Part No.	
Variant No.	26568
JOB No.	P-000000
SHEET No.	1 OF 4

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