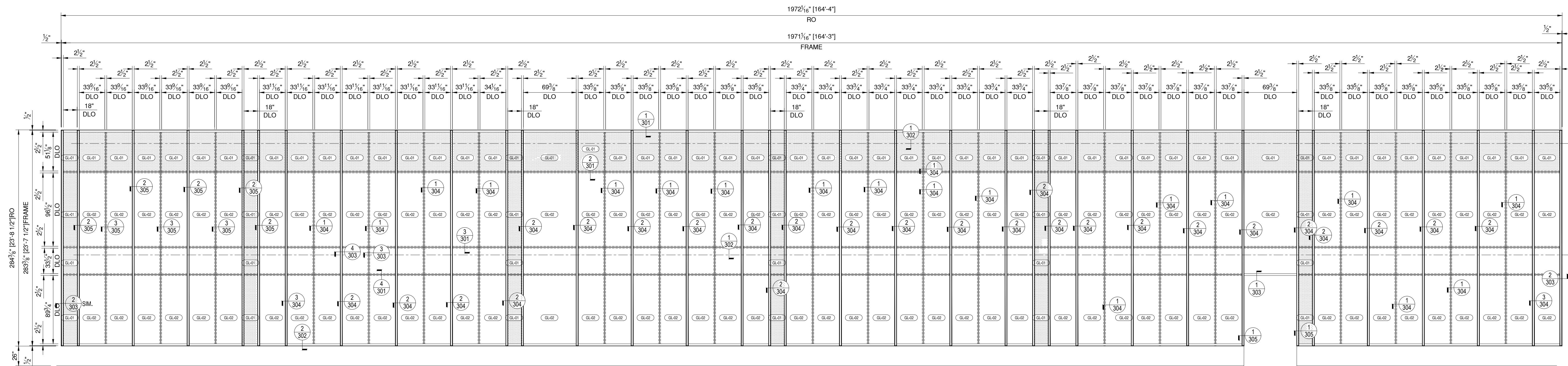


**GROUND FLOOR PLAN**

SCALE: NTS

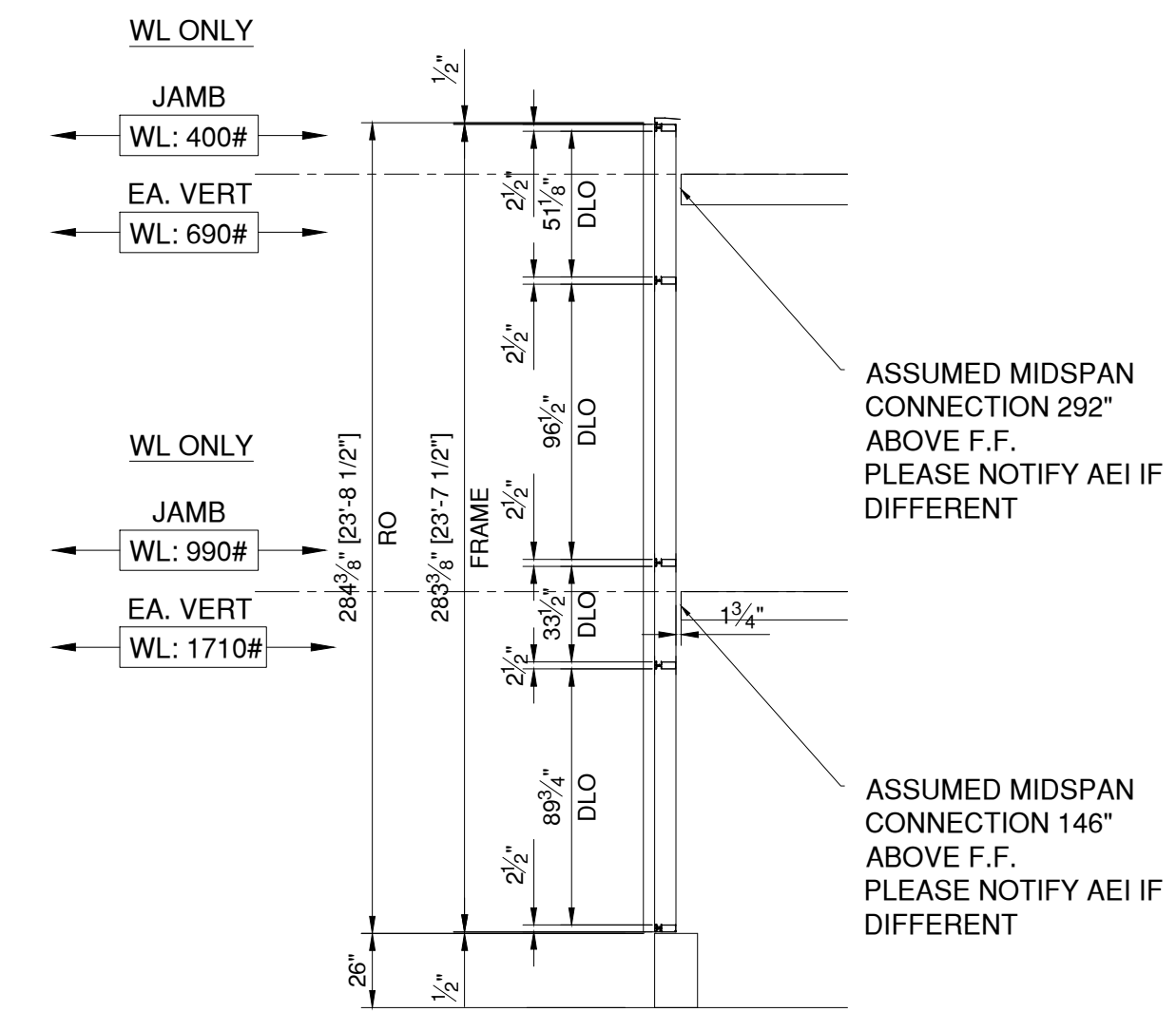
PROJECT NAME		ENGLEWOOD HEALTH	
ARCHITECT		-	
CONTRACTOR		-	
DESCRIPTION			
FLOOR PLANS			
SUBMITTAL		1	
DATE		06-26-23	
DRAWN		AHH	
DATE		-	
SCALE		NTS	
SHEET NO.		100	
NO.	DATE	BY	DESCRIPTION OF REVISIONS
△	09/16/23	AHH	ENGINEERING
△	09/03/23	AHH	REVISIONS
△	07/30/23	AHH	REVISIONS
△	07/14/23	AHH	REVISIONS

SHANK GLAZING SOLUTIONS, LLC  
 info@shankglazingsolutions.com  
 www.shankglazingsolutions.com



**1** EXTERIOR ELEVATION  
 REF NO.: SCALE: 1/2" = 1'-0"  
 1/2" = 1'-0"  
 KAWNEER 1600 SYSTEM 2  
 4 1/2" CAPS @ VERTICALS  
 TOTAL QUANTITY THUS: 1

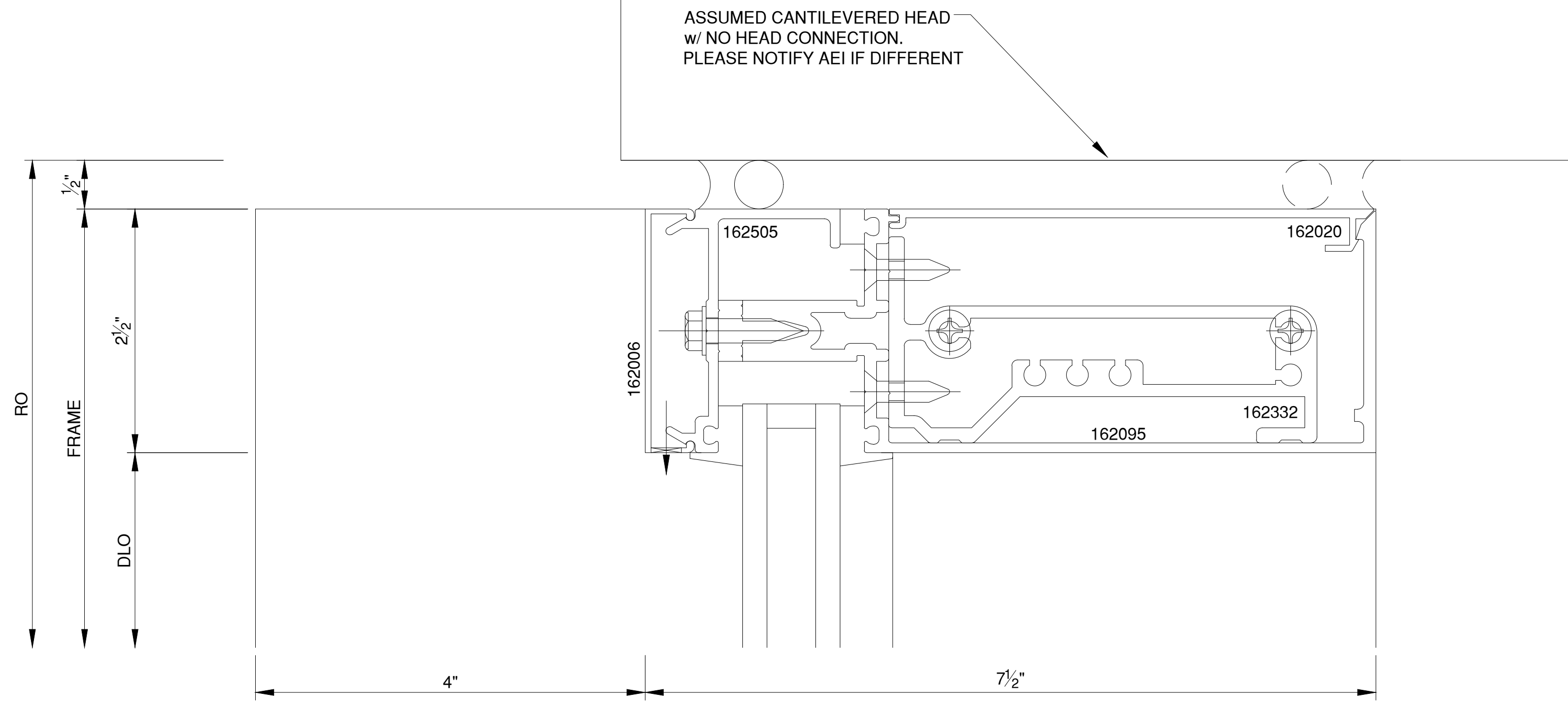
EOR TO VERIFY SUPERSTRUCTURE  
 CAN SUPPORT WIND LOADS PROVIDED



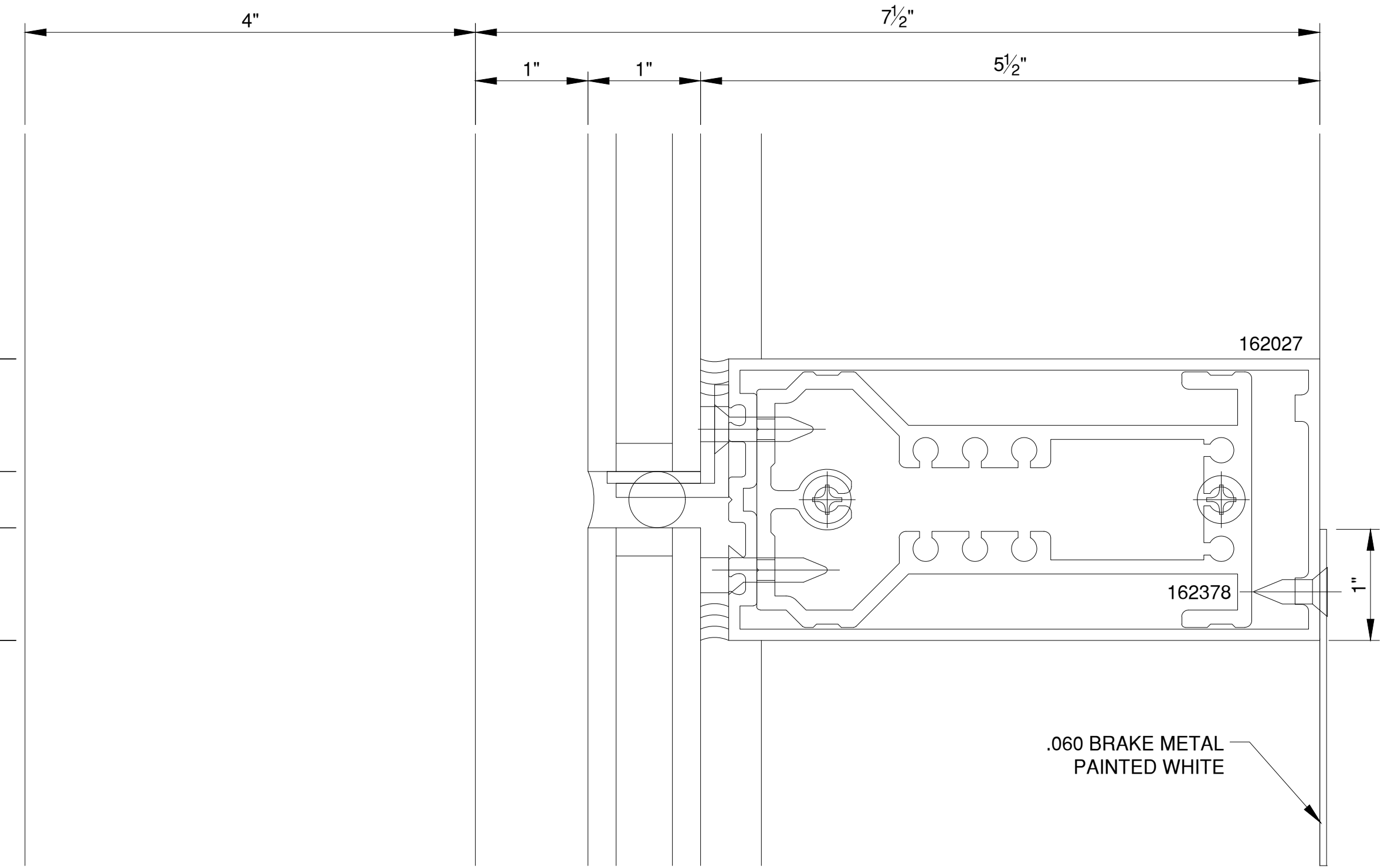
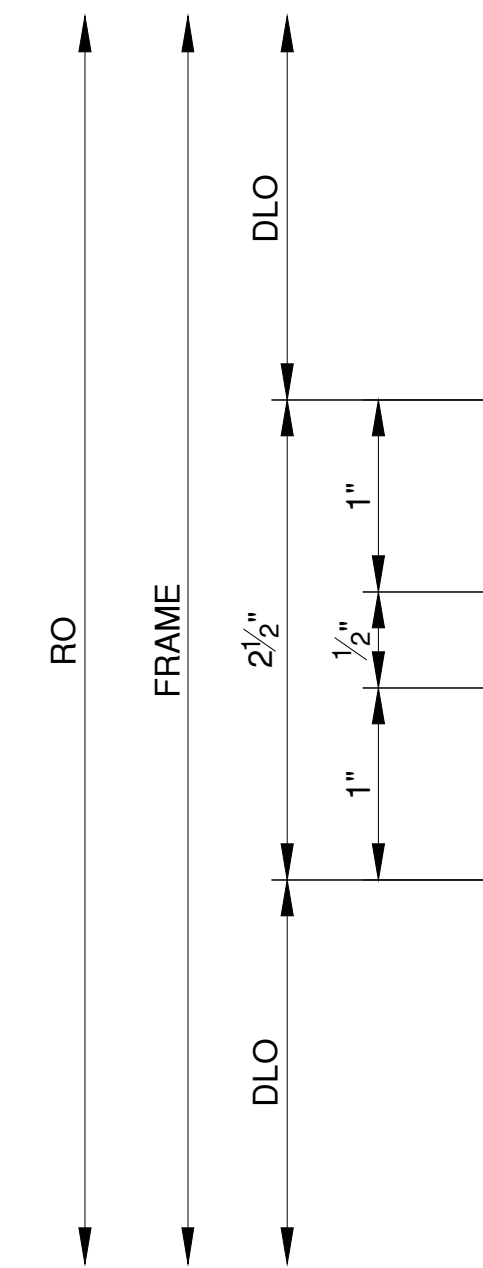
**S** EXTERIOR SECTION  
 REF NO.: SCALE: 1/2" = 1'-0"  
 1/2" = 1'-0"  
 KAWNEER 1600 SYSTEM 2  
 4 1/2" CAPS @ VERTICALS  
 TOTAL QUANTITY THUS: 1

PROJECT NAME	INGLEWOOD HEALTH
ARCHITECT	ARCHITECT
CONTRACTOR	CONTRACTOR
DESCRIPTION	OVERALL ELEVATIONS
SUBMITTAL	1
DATE	06-26-23
DRAWN	AHH
DATE	-
SCALE	3/16" = 1'-0"
SHEET NO.	201

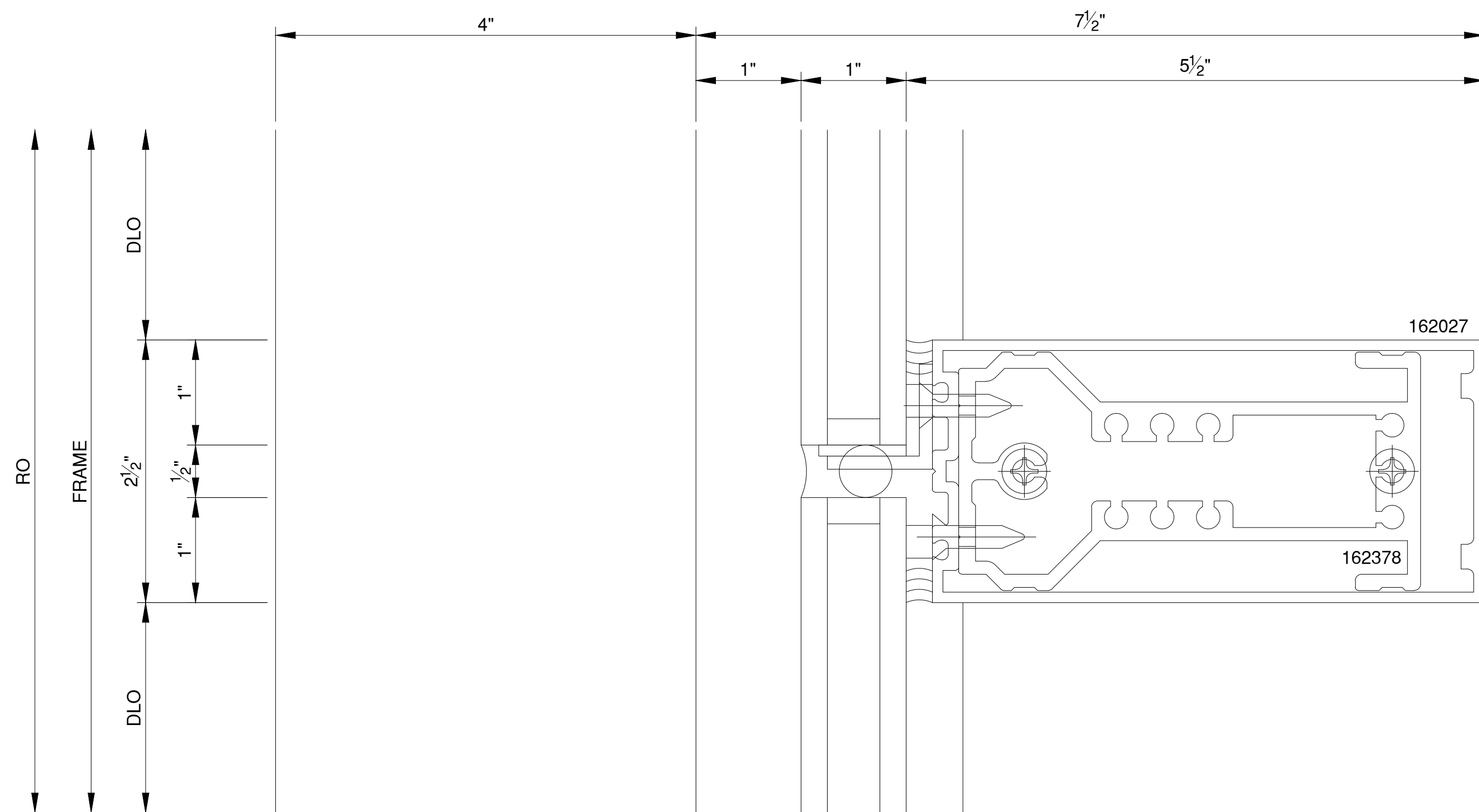
NO.	DATE	BY	DESCRIPTION OF REVISIONS
1	07/14/23	AHH	REVISIONS
2	07/30/23	AHH	REVISIONS
3	08/03/23	AHH	REVISIONS
4	08/16/23	AHH	REVISIONS
5	09/16/23	AHH	ENGINEERING



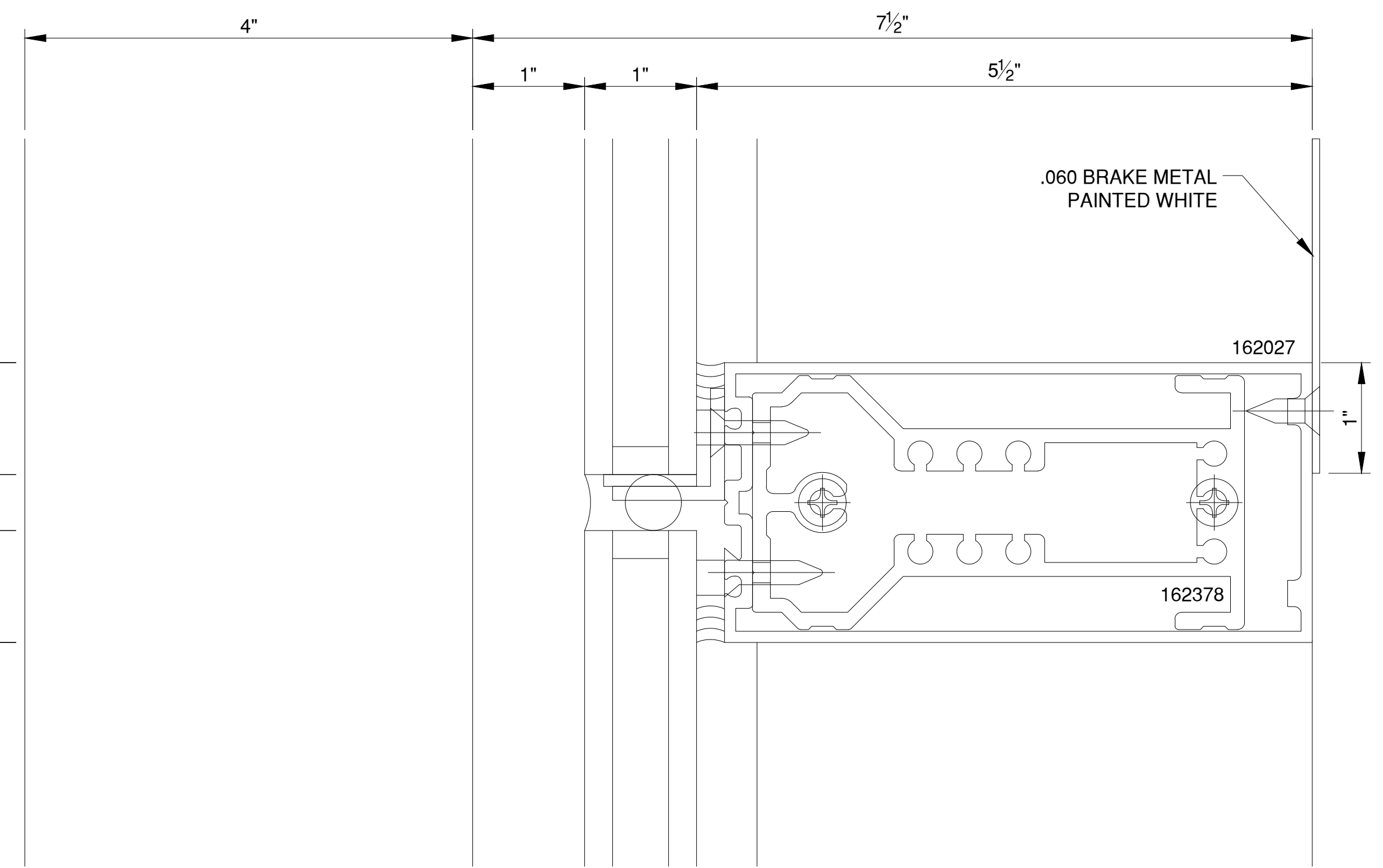
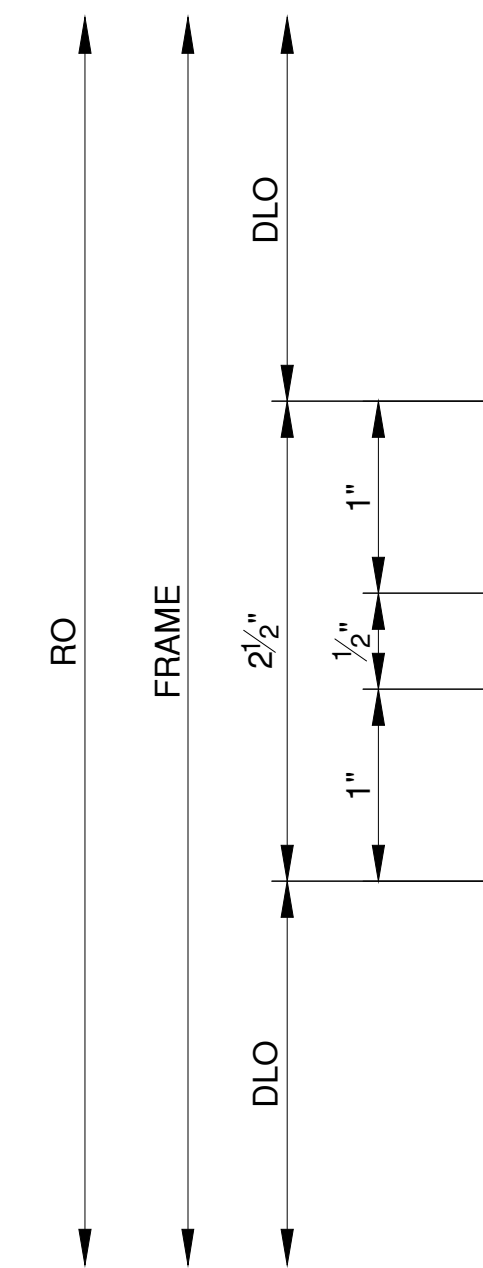
**1** HEAD DETAIL  
 REF NO: -  
 REF SHT: -  
 SCALE: FULL



**3** HORIZONTAL DETAIL @ SIGNAGE  
 REF NO: -  
 REF SHT: -  
 SCALE: FULL



**2** HORIZONTAL DETAIL  
 REF NO: -  
 REF SHT: -  
 SCALE: FULL



**4** HORIZONTAL DETAIL @ SIGNAGE  
 REF NO: -  
 REF SHT: -  
 SCALE: FULL

NO.	DATE	BY	DESCRIPTION OF REVISIONS
1	07/14/23	AHH	REVISIONS
2	07/30/23	AHH	REVISIONS
3	09/02/23	AHH	REVISIONS
4	09/16/23	AHH	ENGINEERING


**SHANKY GLAZING SOLUTIONS, LLC**  
 info@shankyglazingsolutions.com  
 www.shankyglazingsolutions.com

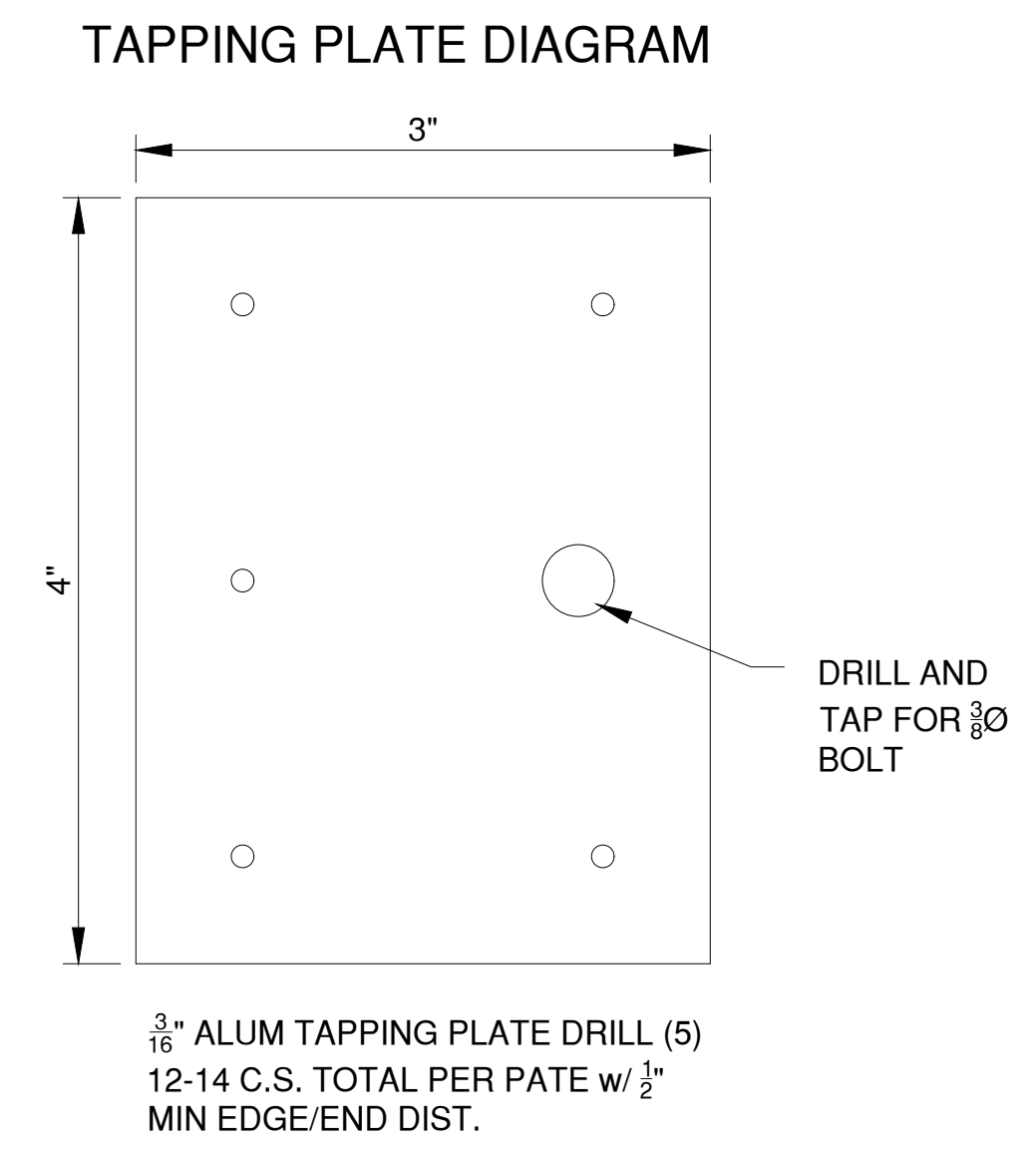
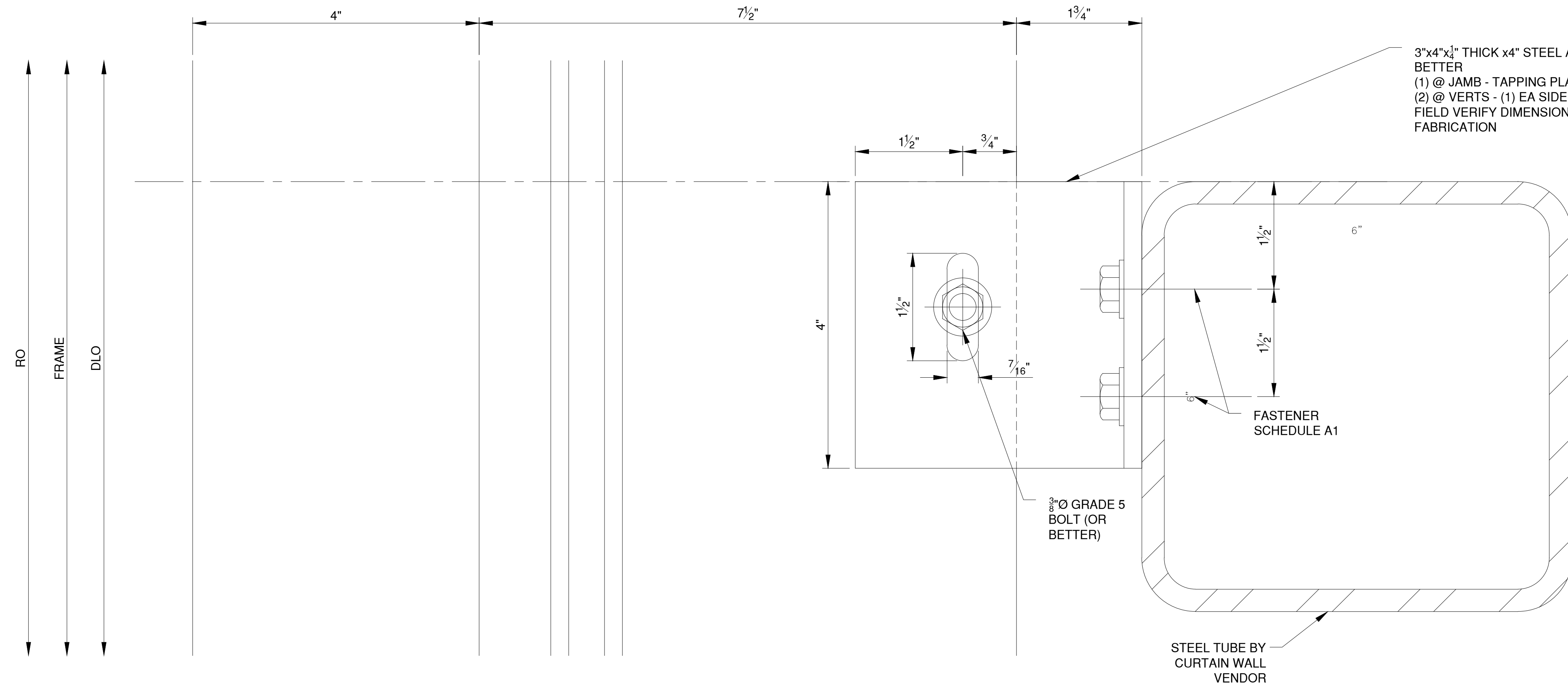
PROJECT NAME	ENGLEWOOD HEALTH
ARCHITECT	-
CONTRACTOR	-

DESCRIPTION

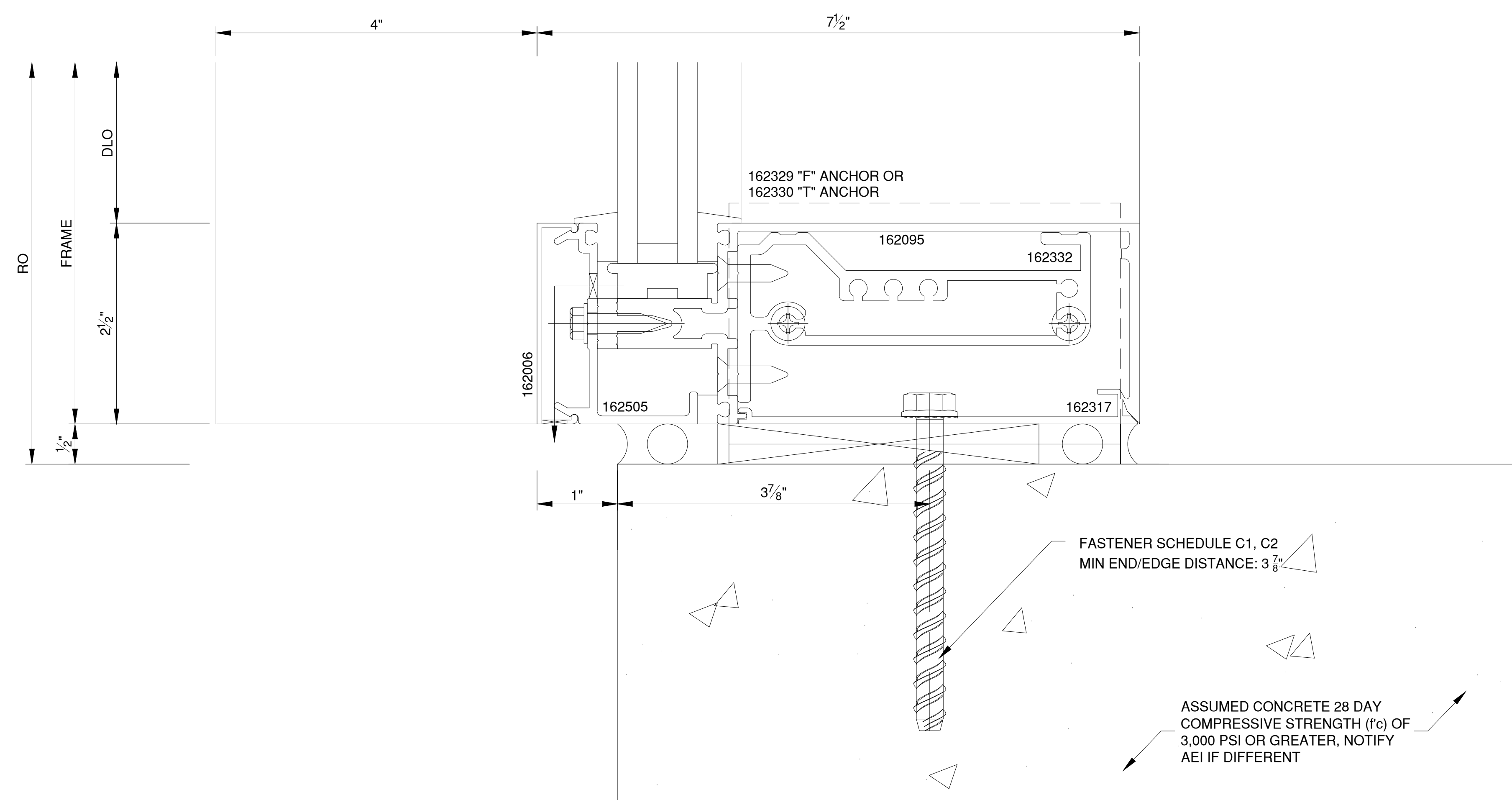
DETAILS

SUBMITTAL	1
DATE	06-26-23
DRAWN	AHH
DATE	-
SCALE	FULL
SHEET NO.	301

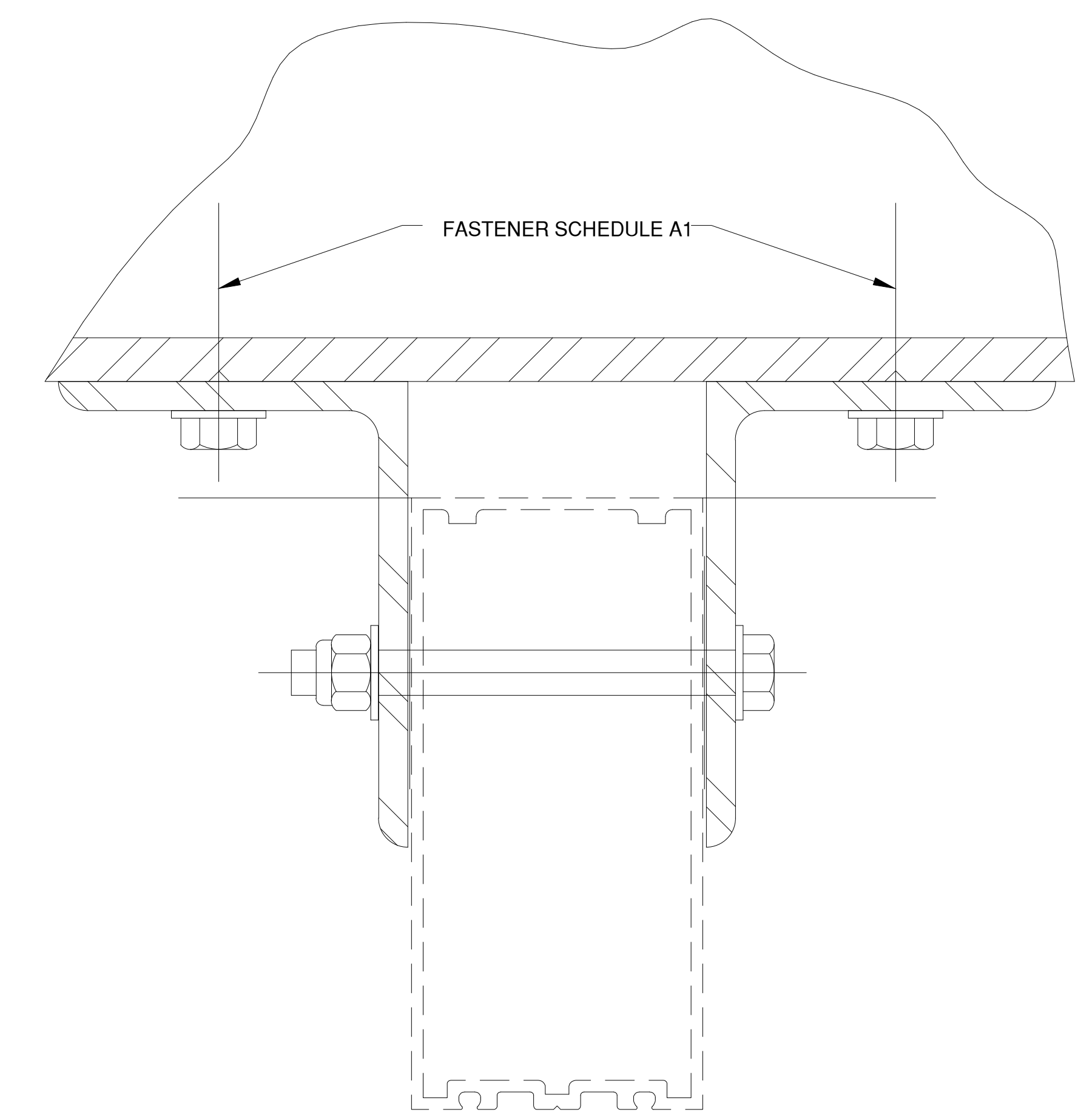




**1** ANCHOR DETAIL  
 REF NO: -  
 REF SHT: -  
 SCALE: FULL



**2** SILL DETAIL  
 REF NO: -  
 REF SHT: -  
 SCALE: FULL




**3** ANCHOR DETAIL  
 REF NO: -  
 REF SHT: -  
 SCALE: FULL

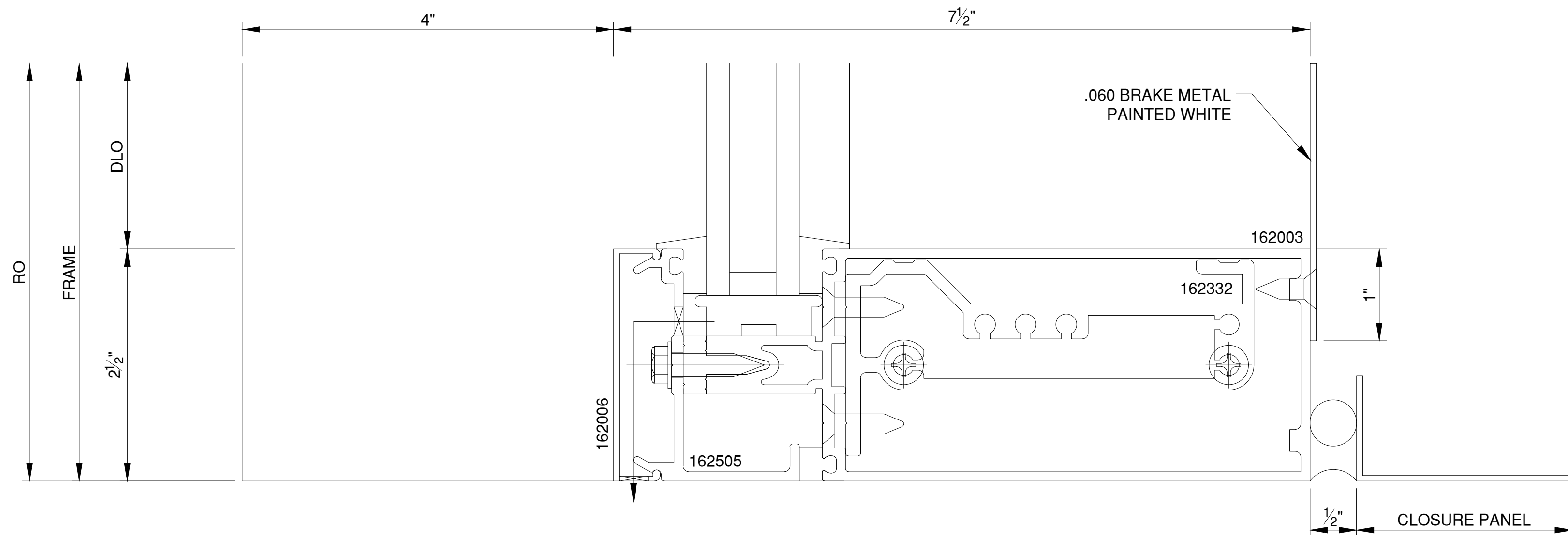
PROJECT NAME	ENGLWOOD HEALTH
ARCHITECT	
CONTRACTOR	
DESCRIPTION	DETAILS
SUBMITTAL	1
DATE	06-26-23
DRAWN	AHH
DATE	
SCALE	FULL
SHEET NO.	302

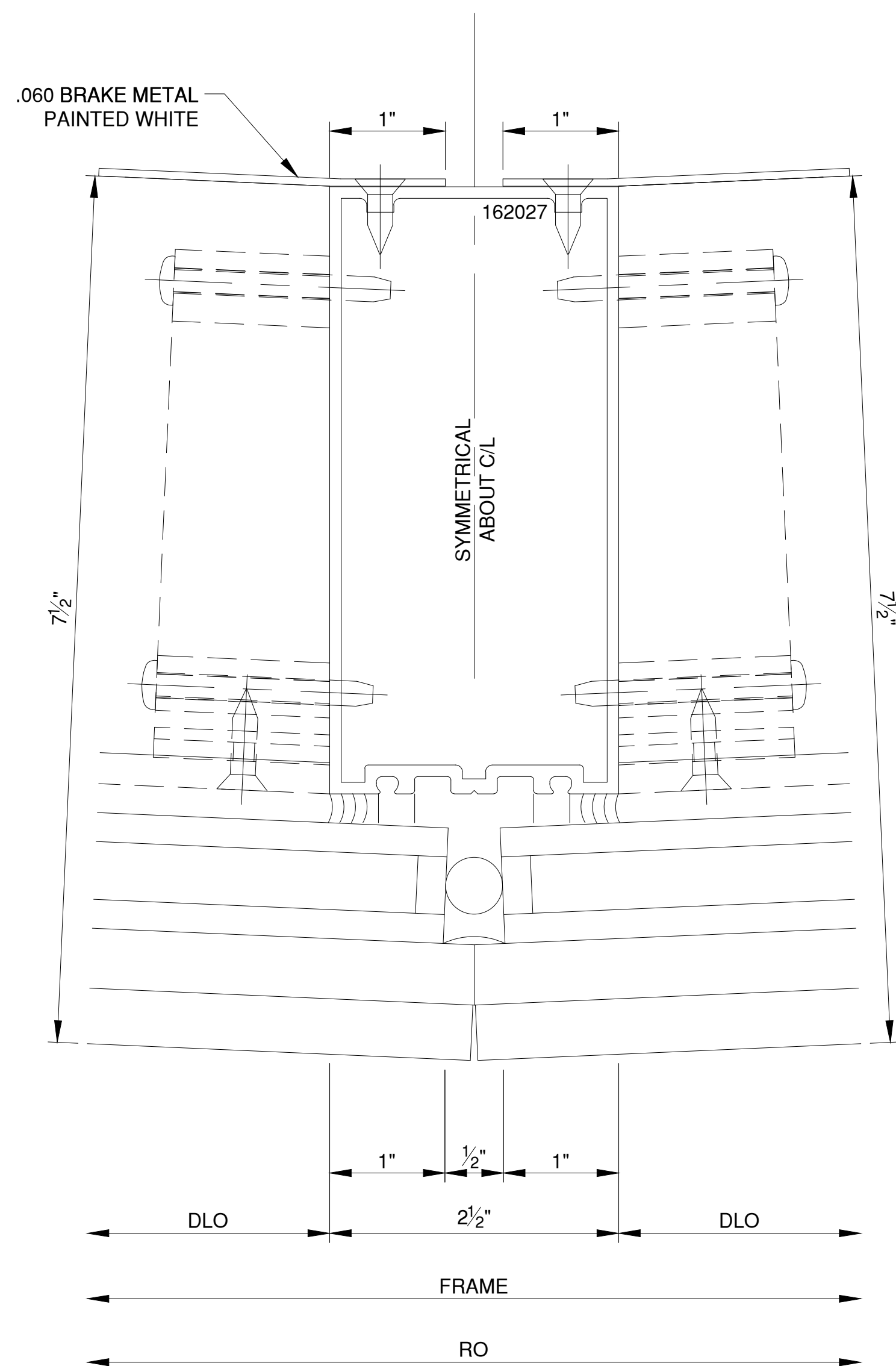
NO.	DATE	BY	DESCRIPTION OF REVISIONS
1	09/16/23	AHH	ENGINEERING
2	09/03/23	AHH	REVISIONS
3	07/30/23	AHH	REVISIONS
4	07/14/23	AHH	REVISIONS

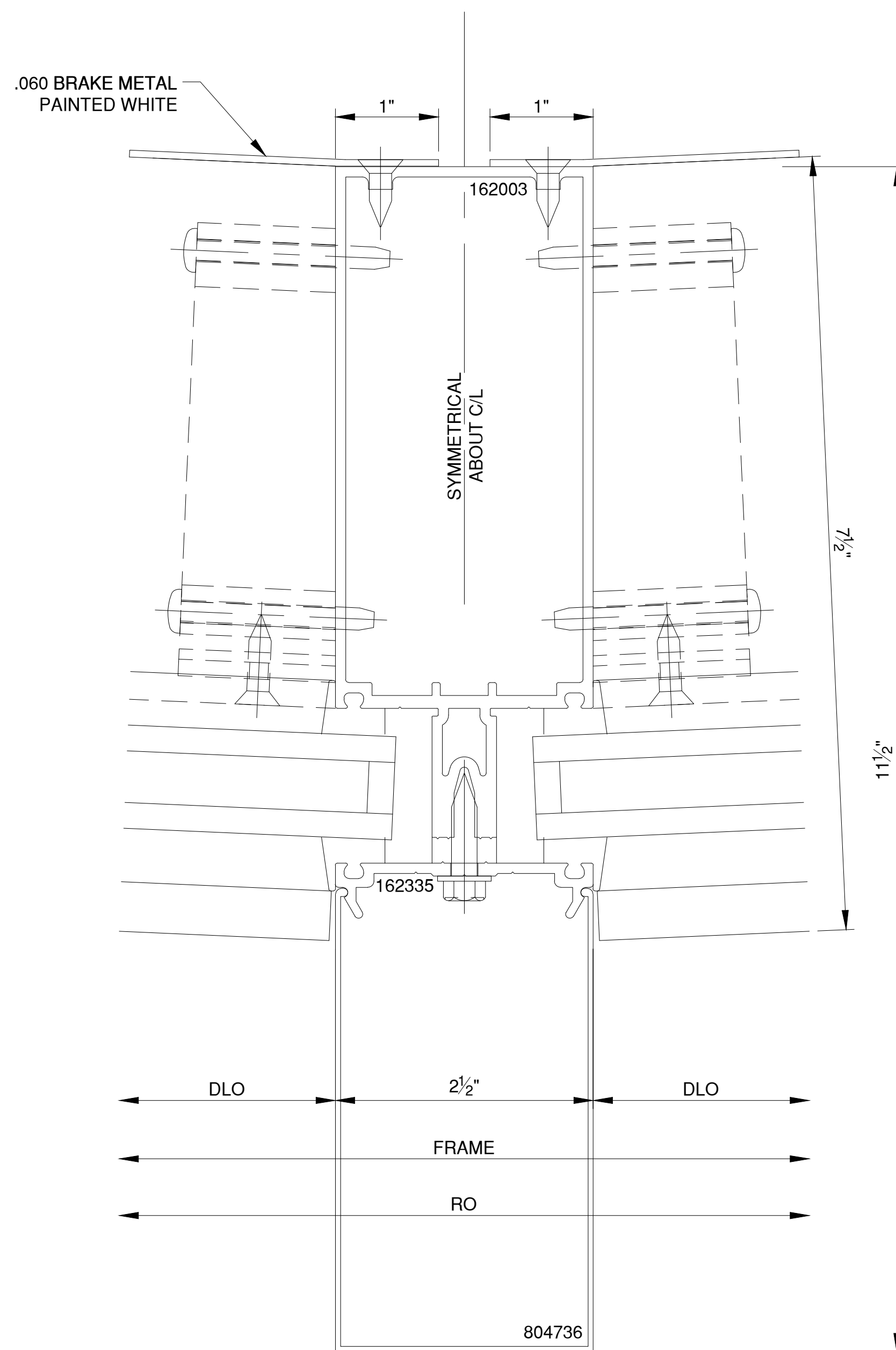
SHANKY GLAZING SOLUTIONS, LLC  
 info@shankyglazingsolutions.com  
 www.shankyglazingsolutions.com



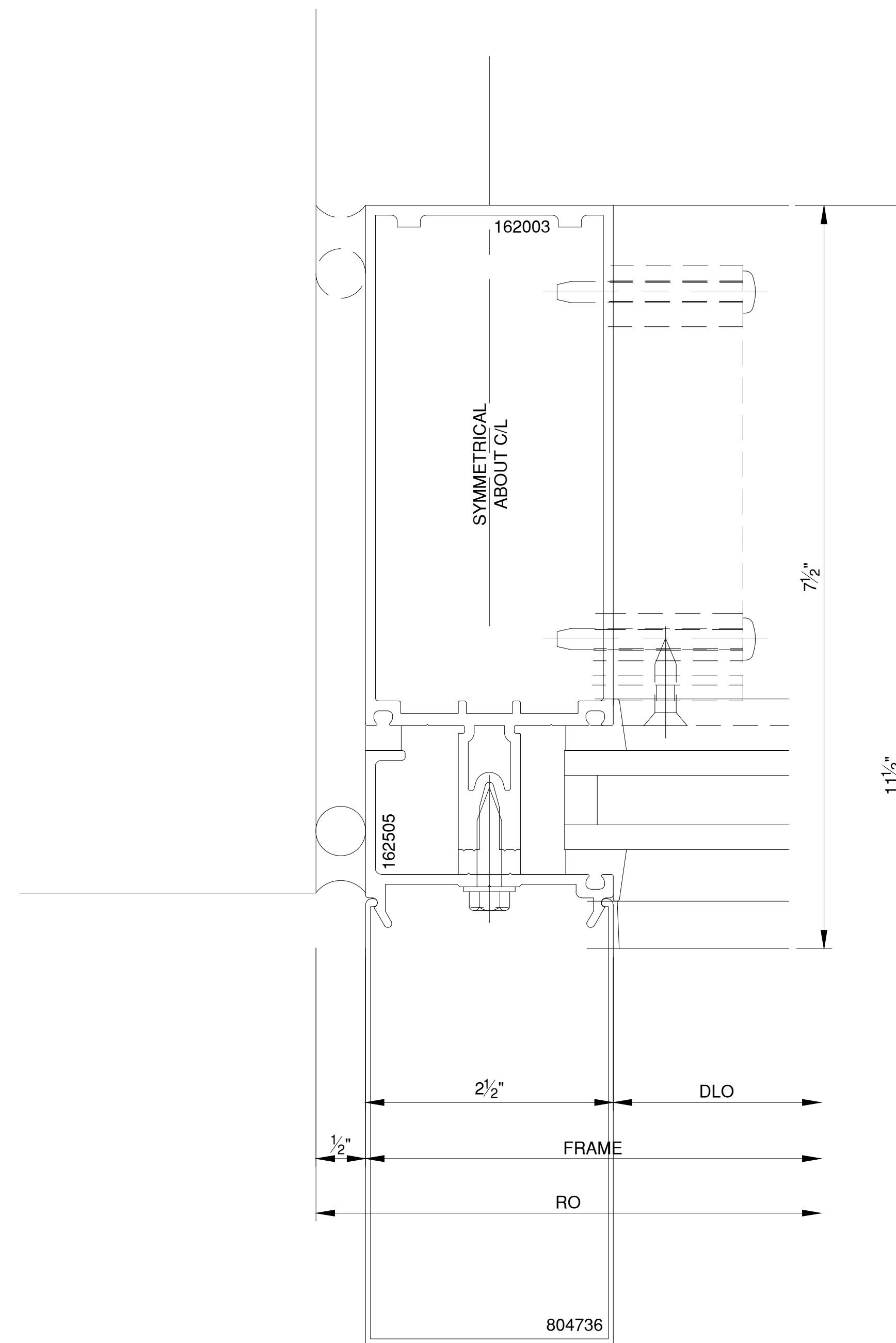
**1** SOFFIT DETAIL  
 REF NO.:  
 REF SHT.:  
 SCALE: FULL



**3** VERTICAL DETAIL  
 REF NO.:  
 REF SHT.:  
 SCALE: FULL



**4** VERTICAL DETAIL  
 REF NO.:  
 REF SHT.:  
 SCALE: FULL




**2** JAMB DETAIL  
 REF NO.:  
 REF SHT.:  
 SCALE: FULL

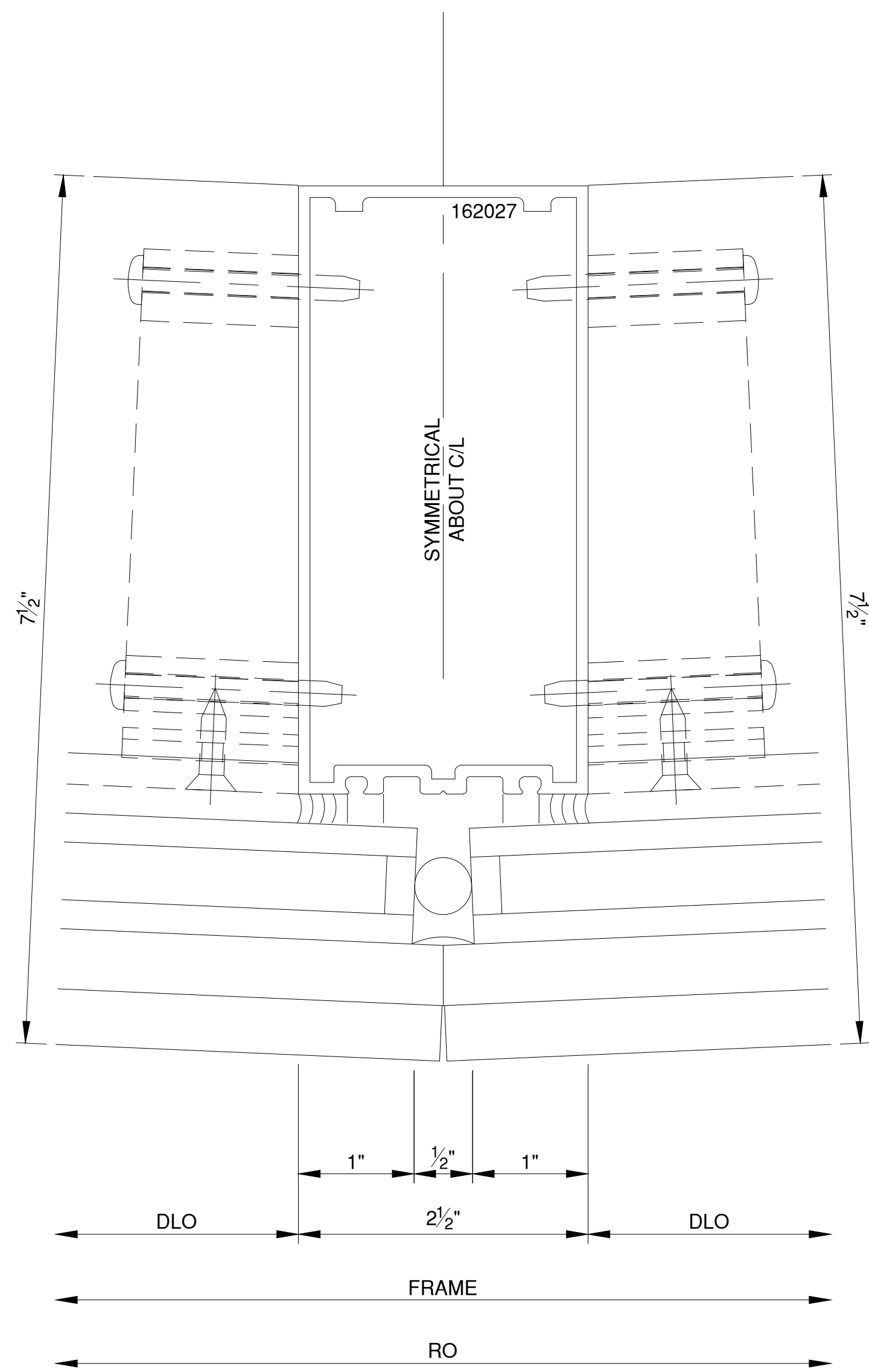
PROJECT NAME	INGLEWOOD HEALTH
ARCHITECT	ARCHITECT
CONTRACTOR	CONTRACTOR
DESCRIPTION	DETAILS
SUBMITTAL	1
DATE	06-26-23
DRAWN	AHH
DATE	-
SCALE	FULL
SHEET NO.	303

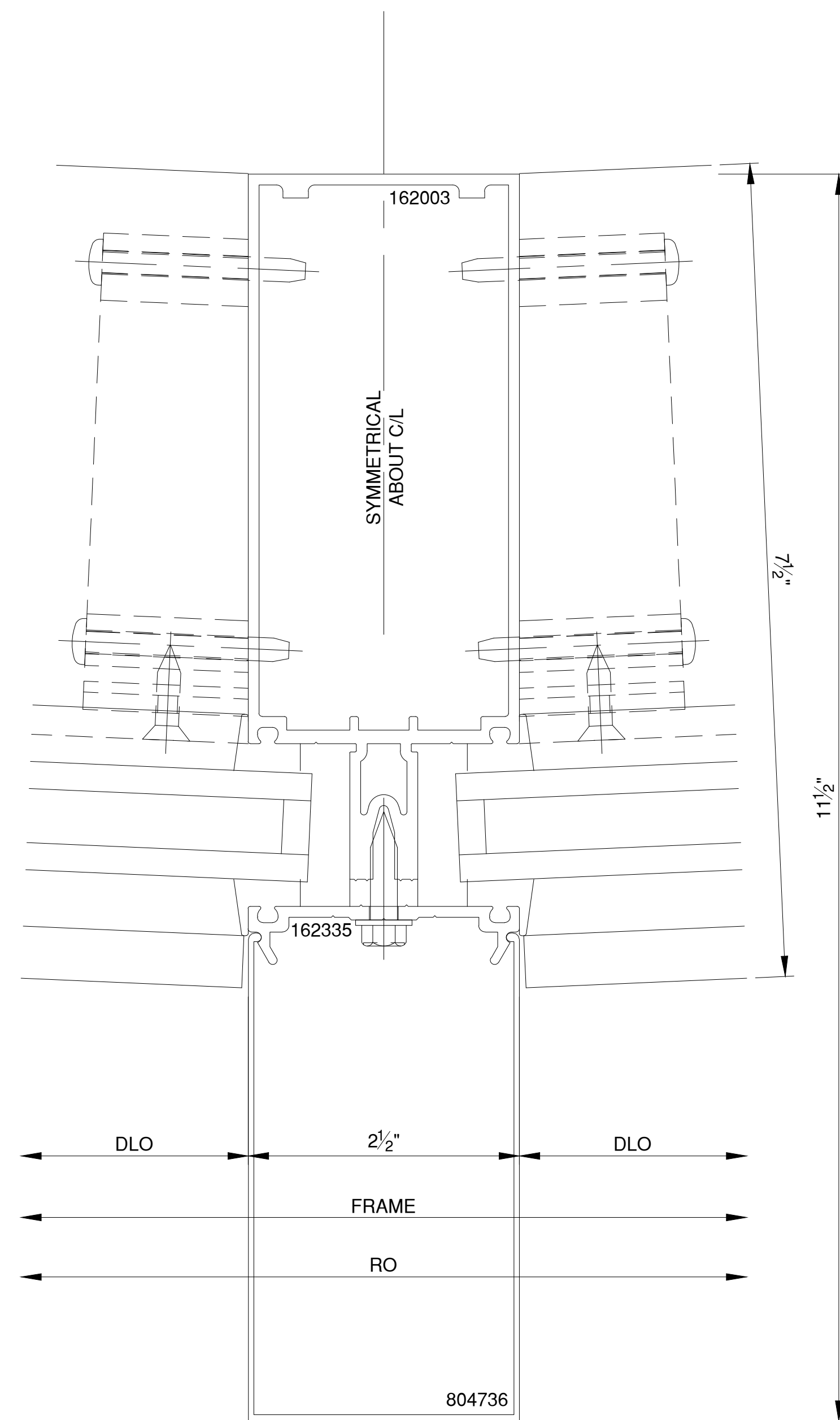
NO.	DATE	BY	DESCRIPTION OF REVISIONS
1	09/16/23	AHH	ENGINEERING
2	09/02/23	AHH	REVISIONS
3	07/30/23	AHH	REVISIONS
4	07/14/23	AHH	REVISIONS

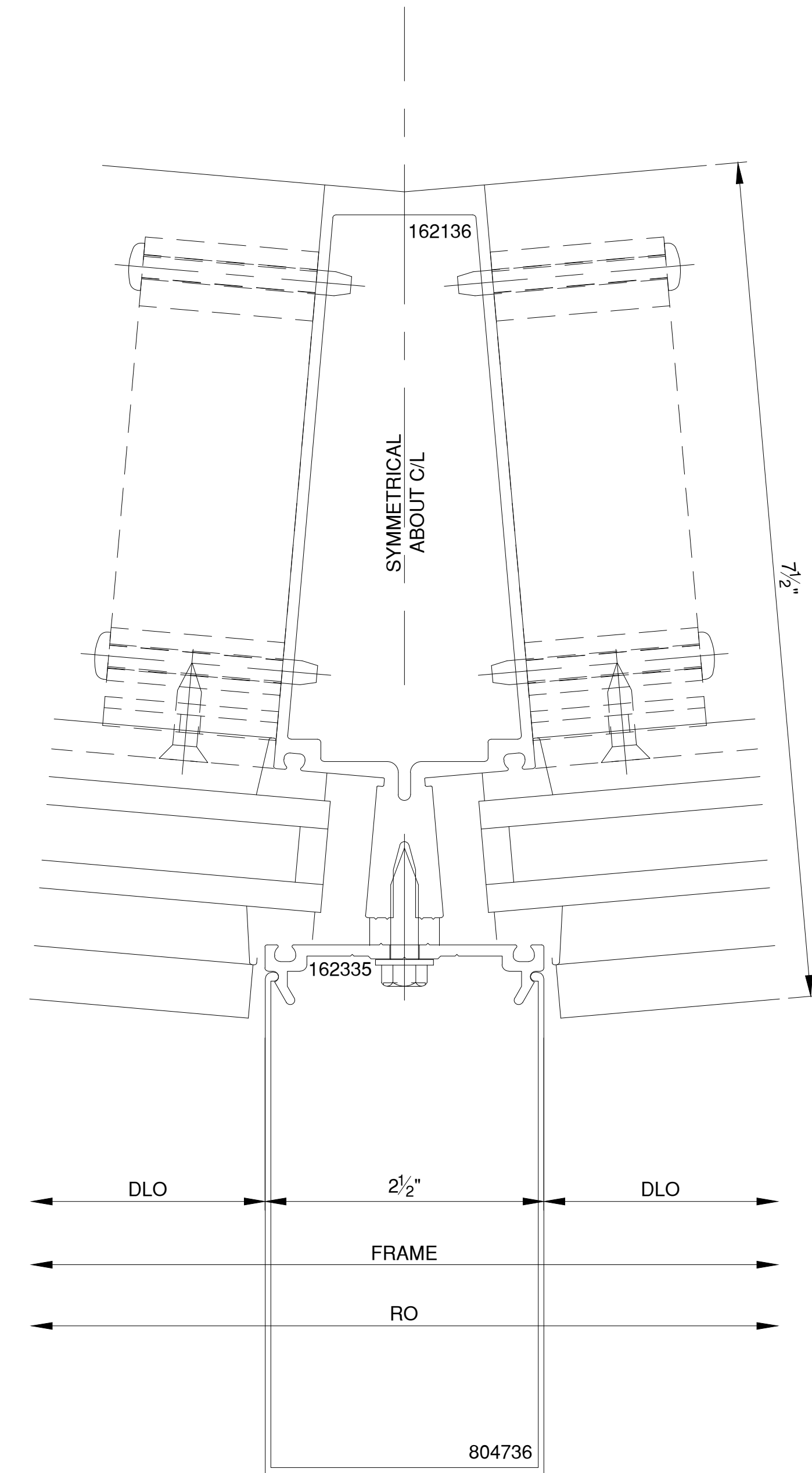
SHANKY GLAZING SOLUTIONS, LLC  
 info@shankyglazingsolutions.com  
 www.shankyglazingsolutions.com



**1** VERTICAL DETAIL  
 REF NO: .  
 REF SH: .  
 SCALE: FULL



**2** VERTICAL DETAIL  
 REF NO: .  
 REF SH: .  
 SCALE: FULL



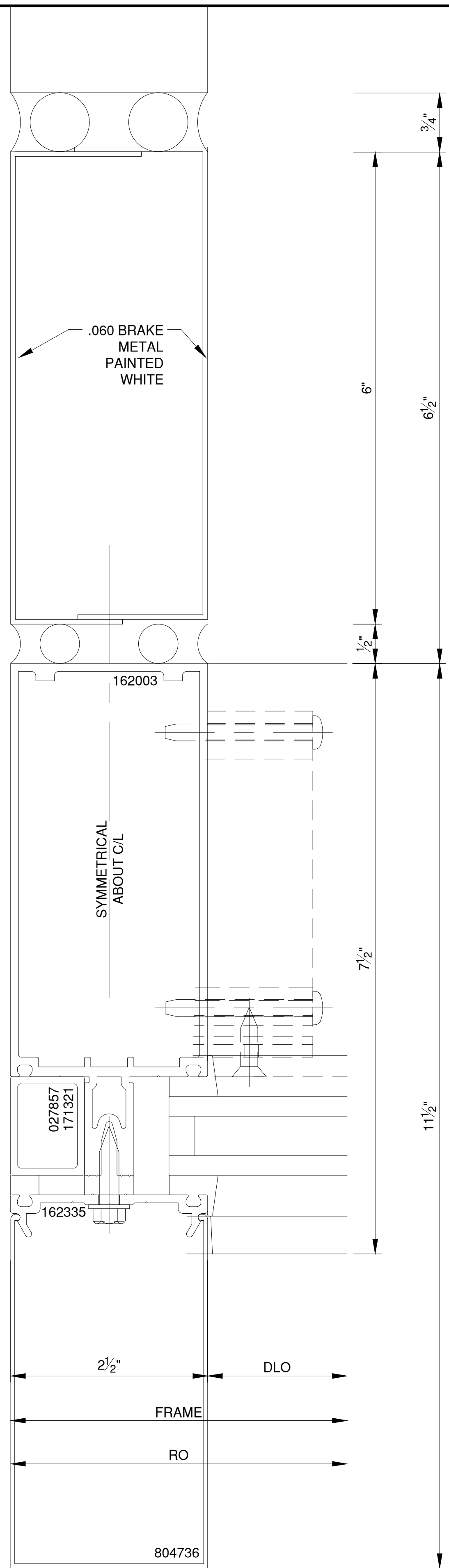
**3** VERTICAL DETAIL  
 REF NO: .  
 REF SH: .  
 SCALE: FULL

NO.	DATE	BY	DESCRIPTION OF REVISIONS
1	07/14/23	AHH	REVISIONS
2	07/30/23	AHH	REVISIONS
3	09/02/23	AHH	REVISIONS
4	09/16/23	AHH	REVISIONS
5	09/16/23	AHH	ENGINEERING

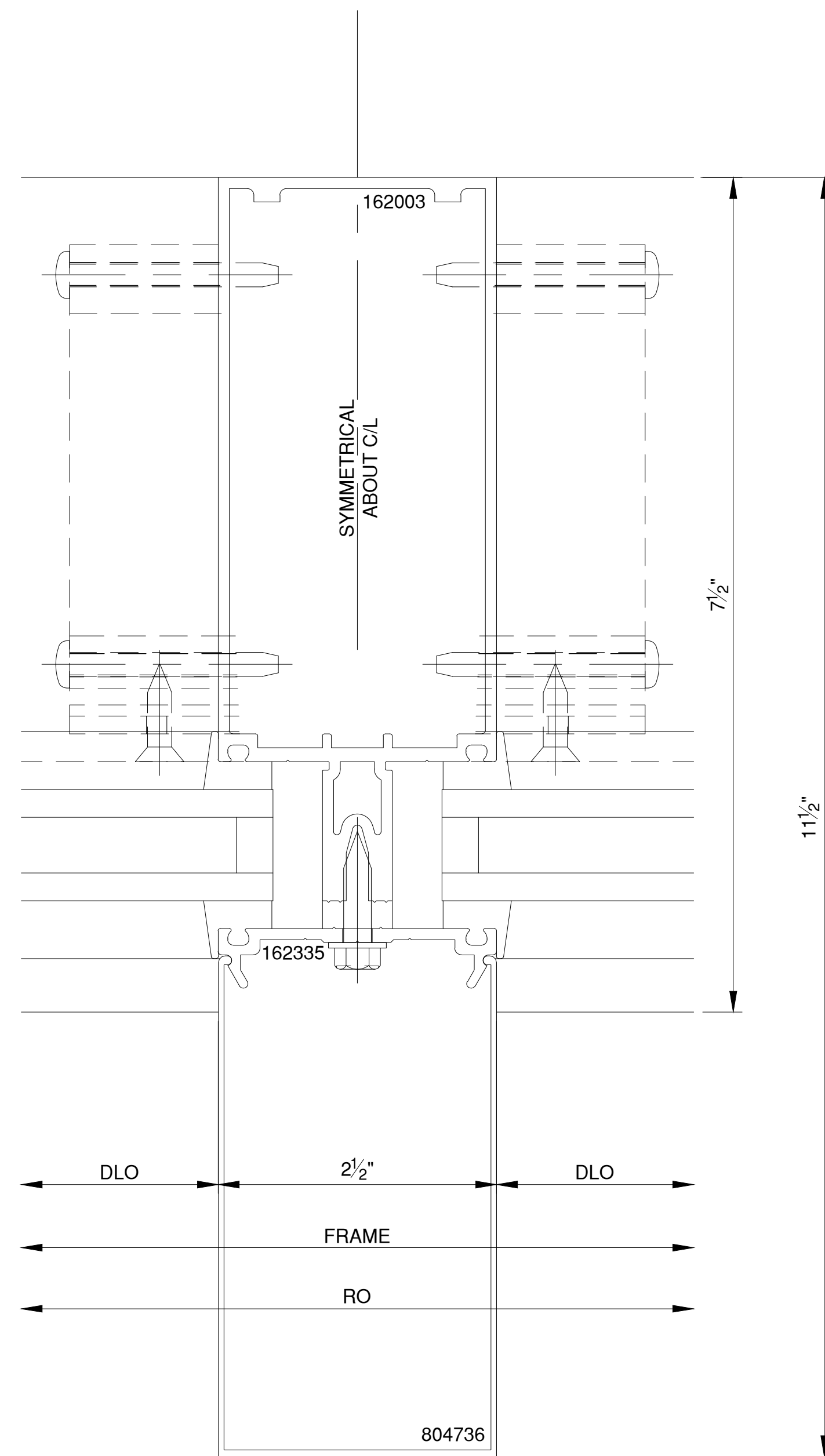

**SHANK GLAZING SOLUTIONS, LLC**  
 info@shankglazingsolutions.com  
 www.shankglazingsolutions.com

PROJECT NAME: ENGLEWOOD HEALTH  
 ARCHITECT: .  
 CONTRACTOR: .

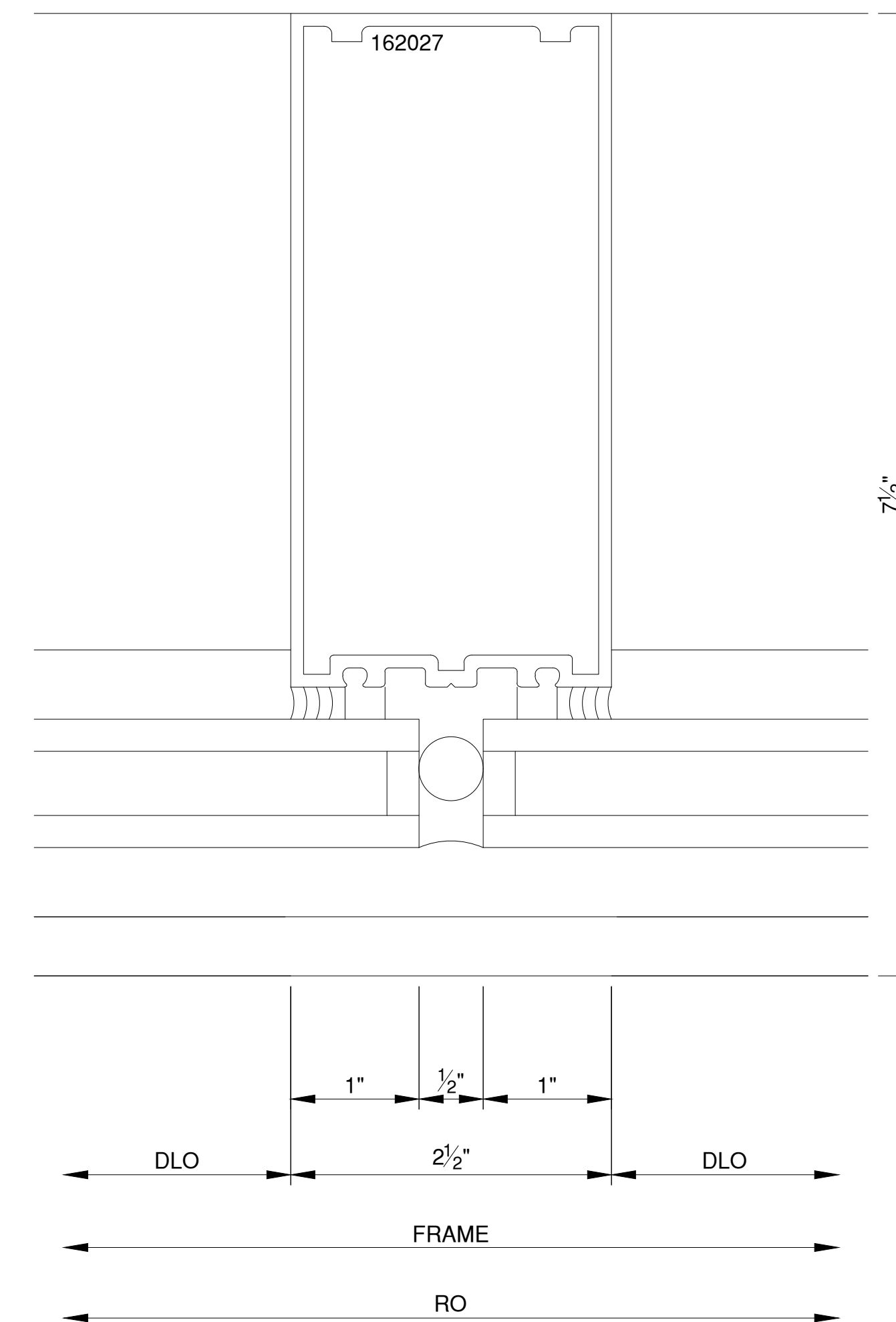
DESCRIPTION	
DETAILS	
SUBMITTAL	1
DATE	06-26-23
DRAWN	AHH
DATE	.
SCALE	FULL
SHEET NO.	304



**1** JAMB DETAIL  
 REF NO.: - SCALE: FULL  
 REF SHT.: -



**2** VERTICAL DETAIL  
 REF NO.: - SCALE: FULL  
 REF SHT.: -



**3** VERTICAL DETAIL  
 REF NO.: - SCALE: FULL  
 REF SHT.: -

PROJECT NAME ENGLEWOOD HEALTH		ARCHITECT -		CONTRACTOR -	
DESCRIPTION DETAILS					
SUBMITTAL 1					
DATE 06-26-23					
DRAWN AHH					
DATE -					
SCALE FULL					
SHEET NO. 305					
NO.	DATE	BY	DESCRIPTION OF REVISIONS		
△	09/16/23	AHH	ENGINEERING		
△	09/02/23	AHH	REVISIONS		
△	07/30/23	AHH	REVISIONS		
△	07/14/23	AHH	REVISIONS		