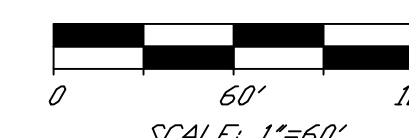
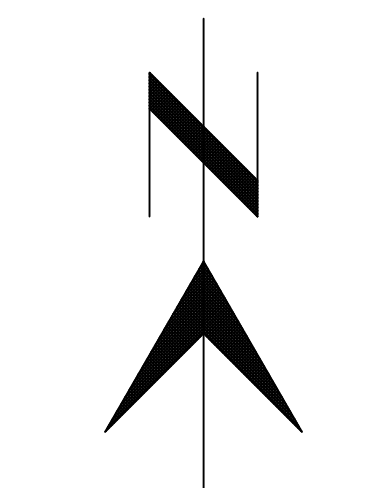


1/2" paper edge

border edge



BHRJUHAK
NMJLKJHLITUOLI
DUYFJHEKLEWEGHLKUWE
NMLKJHLKJGHL;SKJ

Constructed by:

Construction Company

Completion Date

Red-Lines by:

Construction Administrator Name & Company

Completion Date

Record Document by:

As-Built Designer Name & Company

Completion Date



THIS AREA OPTIONAL
FOR CONSULTANT'S NAME/LOGO



THIS AREA FOR CONSULTANT'S
NAME/LOGO WHEN USED

DEPARTMENT OF TRANSPORTATION/ENGINEERING DIVISION

TITLE

NO.	DATE	REVISION	BY

THIS AREA FOR
ENGINEER'S STAMP

Approvals	Signatory	Date
DESIGN SECTION/PERMITS AND CODES		
TRAFFIC ENGINEERING		
TRANSPORTATION PLANNING		
ENGINEERING LANDSCAPE ARCH		
ENGINEERING ADMINISTRATOR		
DRWN. BY _____ 20__	DSGN. BY _____ 20__	CHKD. BY _____ 20__

Approved _____ 20__ OF _____

TRANSPORTATION DIRECTOR

REF. _____ SCALE: _____

PLAN NO. _____

border edge

1/2" paper edge

paper edge

1/2"

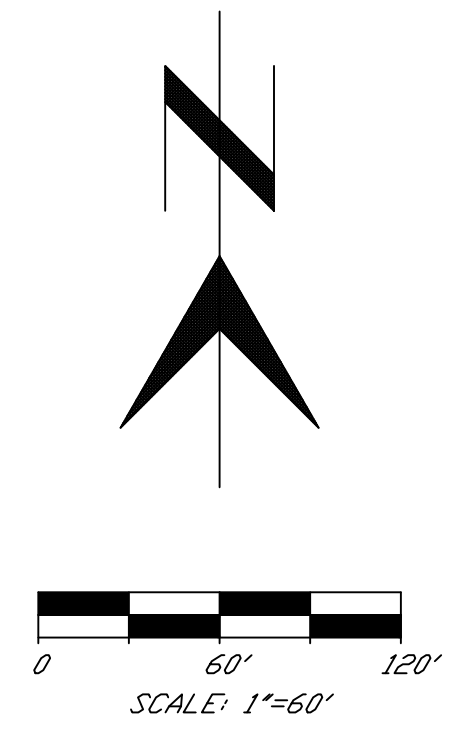
border edge

border edge

1/2"

paper edge

1/2" paper edge
border edge



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NMJLKJHLITUOLI
DUYFJHBKLWEGHLKUWE
NMLKJHLKJGHL;SKJ


paper edge

2"

border edge

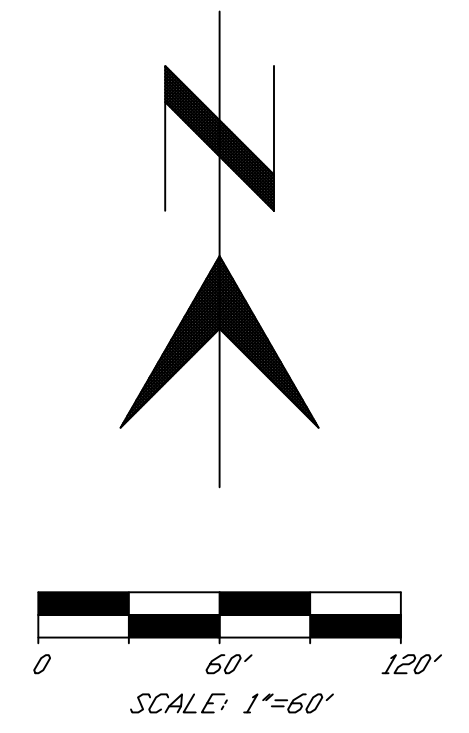
border edge

1/2" paper edge

THIS AREA OPTIONAL FOR CONSULTANT'S NAME/LOGO						 CITY OF TUCSON	THIS AREA FOR CONSULTANT'S NAME/LOGO WHEN USED			DEPARTMENT OF TRANSPORTATION/ENGINEERING DIVISION					
							TITLE			TITLE					
THIS AREA FOR ENGINEER'S STAMP						Approvals		Signatory		Date					
						_____		_____		_____		Approved _____ 20__		OF	
						_____		_____		_____		TRANSPORTATION DIRECTOR			
						_____		_____		_____		REF. _____ SCALE: _____			
NO.	DATE	REVISION	BY	CHKD.	APPR.	DRWN. BY _____ 20__	DSGN. BY _____ 20__	CHKD. BY _____ 20__	PLAN NO. _____						

1/2" paper edge
border edge

1/2" paper edge
border edge



BHRJUHAH

NMJLKJHLITUOLI
DUYFJHBKLEWGLKUWE
NMLKJHLKJHL:SKJ

0+00 1+00 2+00 3+00 4+00 5+00 6+00 7+00 8+00 9+00 10+00 11+00 12+00

paper edge

2"

border edge

border edge

1/2" paper edge

THIS AREA FOR CONSULTANT'S
NAME/LOGO WHEN USED

DEPARTMENT OF TRANSPORTATION/ENGINEERING DIVISION

THIS AREA OPTIONAL
FOR CONSULTANT'S NAME/LOGO



TITLE

NO.	DATE	REVISION	BY	CHKD.	APPR.

THIS AREA FOR
ENGINEER'S STAMP

Approvals	Signatory	Date	Approved _____ 20__	OF
			TRANSPORTATION DIRECTOR	
			REF. _____ SCALE: _____	
DRWN. BY _____ 20__	DSGN. BY _____ 20__	CHKD. BY _____ 20__	PLAN NO. _____	

paper edge 1/2" border edge