



# ANDERSON COUNTY HEALTH DENTAL OFFICE RENOVATIONS

710 N MAIN STREET, SUITE C, CLINTON, TENNESSEE 37716

ANDERSON COUNTY..... OWNER

## CONSTRUCTION DOCUMENTS

# BLANKENSHIP & PARTNERS, LLC

## ARCHITECTS & PLANNERS

STRUCTURAL ENGINEERS.....FE DESIGN & ENGINEERING, P.C.

MECHANICAL-PLUMBING ENGINEERS...PROFICIENT ENGINEERING

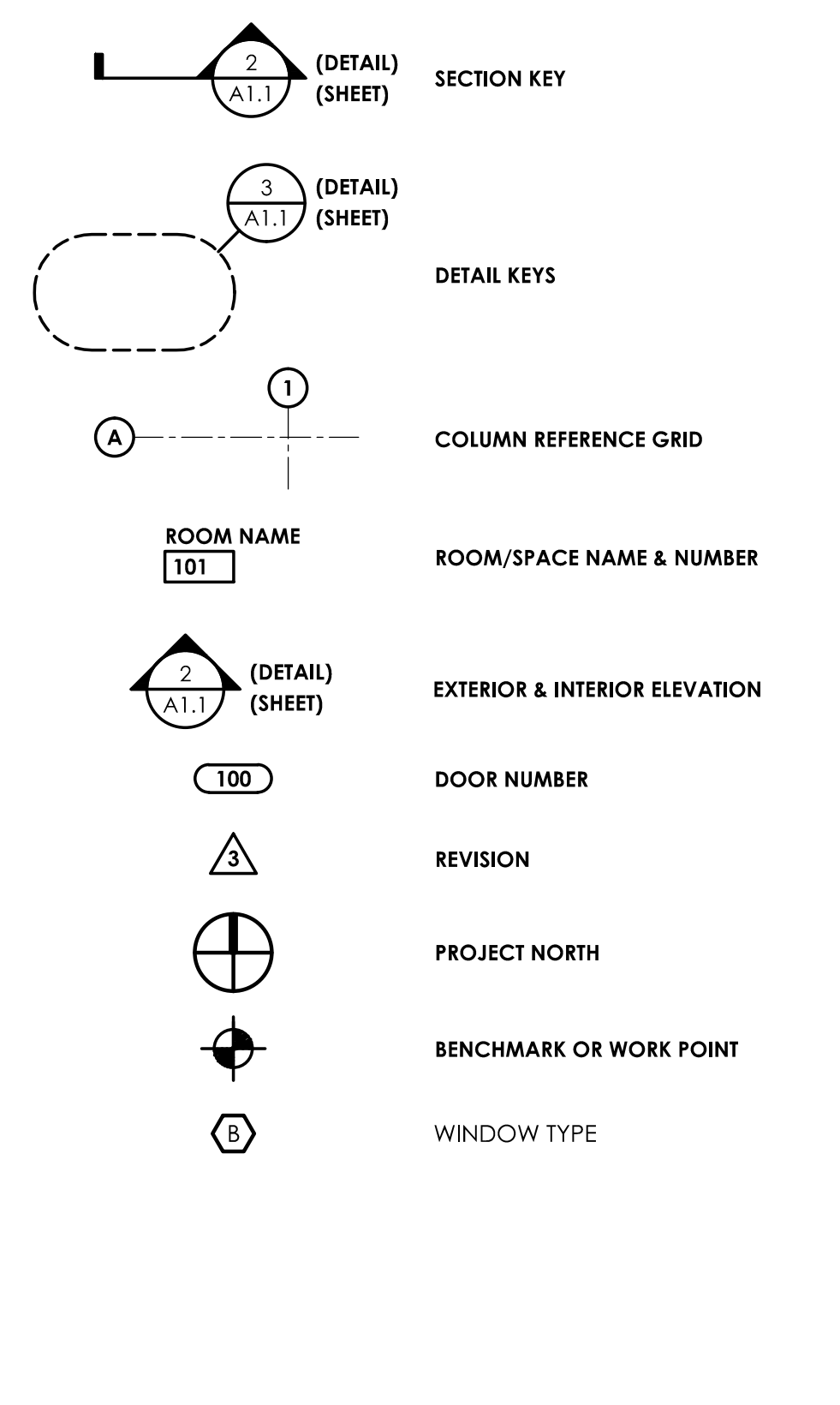
ELECTRICAL ENGINEERS.....VRELAND ENGINEERS



### ABBREVIATIONS

ADJ	ADJUSTABLE	L	LENGTH	TYP	TYPICAL
ALUM	ALUMINUM	LLH	LONG LEG HORIZONTAL	UNO	UNLESS NOTED OTHERWISE
ARCH	ARCHITECTURAL	LLV	LONG LEG VERTICAL	VB	VAPOR BARRIER
ASPH	ASPHALT	LP	LOW POINT	VERT	VERTICAL
A.F.F.	AT FINISHED FLOOR	MAS	MASONRY	W	WIDE OR WIDTH
B.O.C	BOTTOM OF CURB	MATL	MATERIAL	W/	WITH
BD	BOARD	MAX	MAXIMUM	W/O	WITHOUT
BLDG	BUILDING	MECH	MECHANICAL	WD	WOOD
BLKG	BLOCKING	MFR	MANUFACTURE(R)	WR	WATER RESISTANT
BM	BENCHMARK	MH	MANHOLE	WR	WELDED WIRE MESH
BRG	BEARING	MIN	MINIMUM	WWM	YARD
B.O.W	BOTTOM OF WALL	MISC	MISCELLANEOUS	YD	YARD
CB	CATCH BASIN	MTL	METAL	@	ANGLE
CEM	CEMENT	NEO	NEOPRENE	AT	AT
CJ	CONTROL JOINT	NIC	NOT IN CONTRACT	CL	CENTERLINE
CLR	CLEAR(ANCE)	NO	NUMBER	Ø	CHANNEL
COL	COLUMN	NTS	NOT TO SCALE	±	DIAMETER
CONC	CONCRETE	OC	ON CENTER	±	PLUS OR MINUS
CONST	CONSTRUCTION	OD	OUTSIDE DIAMETER	d	PENNY
CONT	CONTINUOUS OR CONTINUE	OH	OPPOSITE HAND	Ⓣ	PLATE
COORD	COORDINATE	OPNG	OPENING		
CORR	CORRUGATED OR CORRIDOR	OPP	OPPOSITE		
CRS	COURSE(S)	P LAM	PLASTIC LAMINATE		
CTSK	COUNTERSUNK	PREFAB	PREFABRICATED		
CU	CUBIC	P.T.	PRESSURE TREATED		
CU FT	CUBIC FEET	PT	POINT		
CU YD	CUBIC YARD	PTD	PAINTED		
DTL	DETAIL	PVC	POLYVINYL CHLORIDE		
DIM	DIMENSION	R	RADIUS		
DWG	DRAWING	RCP	REINFORCED CONCRETE PIPE		
EF	EACH FACE	REINF	REINFORCED		
EJ	EXPANSION JOINT	RET	RETAINING		
ELEC	ELECTRIC(AL)	RO	ROUGH OPENING		
EQ	EQUAL	ROW	RIGHT-OF-WAY		
EQUIP	EQUIPMENT	RS	ROUGH SAWN		
EW	EACH WAY	RVL	REVEAL		
EXIST	EXISTING	SAN	SANITARY		
EXP	EXPANSION / EXPOSED	SCH	SCHEDULE		
FT	FEET / FOOT	SEC	SECURE		
FIG	FOOTING	SECT	SECTION		
FRT	FIRE RETARDANT TREATED	SHT	SHEET		
FSTN	FASTEN(ED)	SIM	SIMILAR		
GA	GAUGE, GAGE	SPEC	SPECIFICATION(S)		
GALV	GALVANIZED	SQ	SQUARE		
GL	GLASS	SQ FT	SQUARE FOOT / FEET		
GL	GLASS	SQ IN	SQUARE INCH(ES)		
HDW	HARDWARE	SQ YD	SQUARE YARD		
HORIZ	HORIZONTAL	SST	STAINLESS STEEL		
HP	HIGH POINT	STD	STANDARD		
HT	HEIGHT	STL	STEEL		
ID	INSIDE DIAMETER	STOR	STORAGE		
IN	INCH	STRUCT	STRUCTURAL		
INSUL	INSULATE(D),(ING)	T.O.C	TOP OF CURB		
INV	INVERT	THK	THICKNESS		
IPS	IRON PIPE SIZE	THR	THREADS		
JT	JOINT	TRTD	TREATED		
		TW	TOP OF WALL		

### GRAPHIC SYMBOLS LEGEND



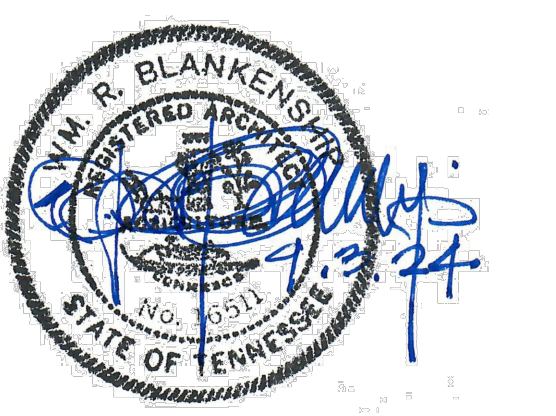
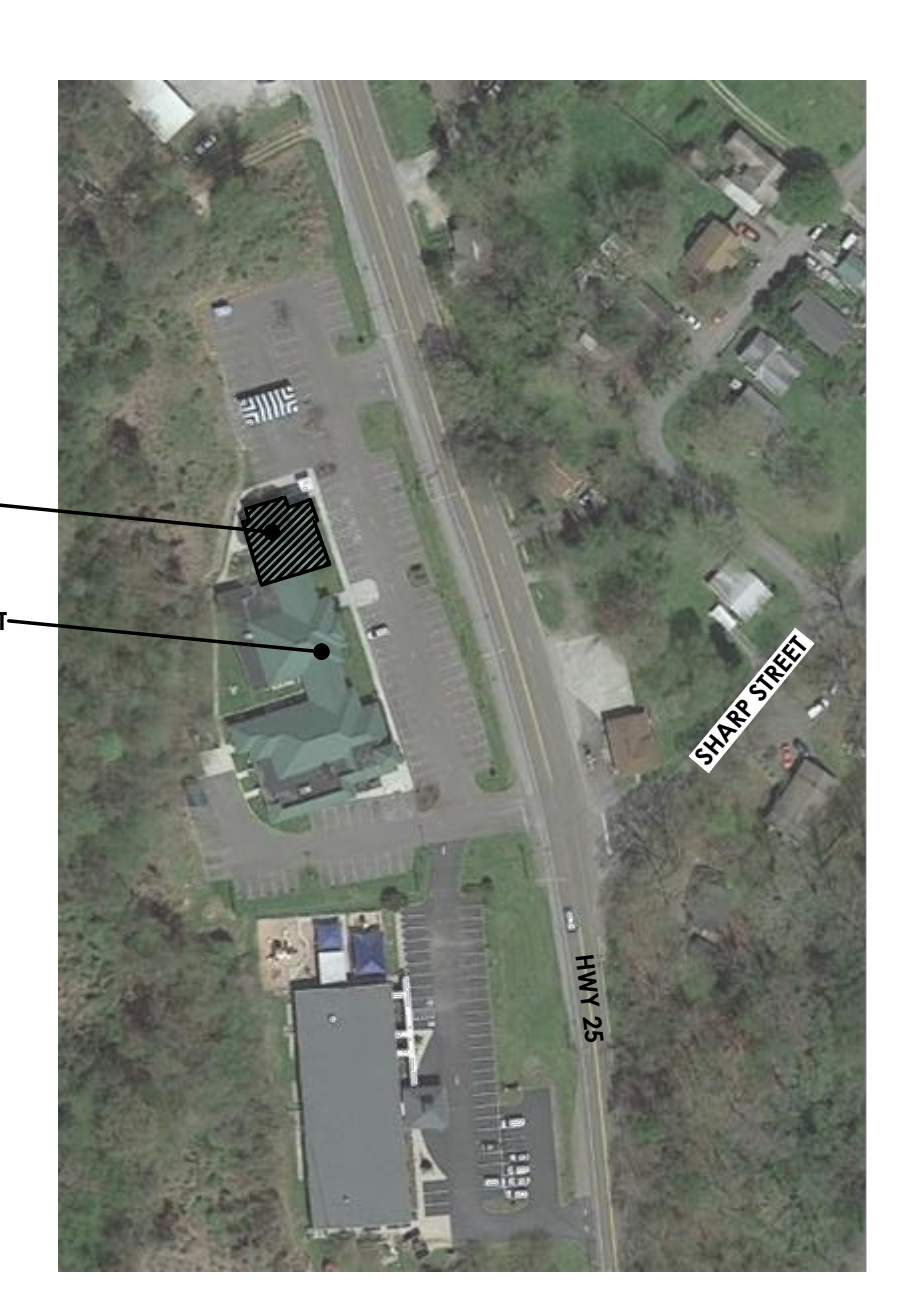
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### CODE INFORMATION

DESCRIPTION	
THIS PROJECT CONSIST OF THE PARTIAL RENOVATION OF THE ANDERSON COUNTY HEALTH DEPARTMENT MEDICAL BUILDING FOR THE RELOCATION OF THE DENTAL SERVICES. THE RENOVATION WILL AFFECT APPROXIMATELY 2,721 SF OF THE 16,528 SF ANDERSON COUNTY HEALTH DEPARTMENT MEDICAL BUILDING.	
APPLICABLE CODES:	
2018 INTERNATIONAL BUILDING CODE	
2018 INTERNATIONAL ENERGY CONSERVATION CODE	
2012 NFPA70 NATIONAL ELECTRICAL CODE	
2018 INTERNATIONAL FUEL GAS CODE	
2018 INTERNATIONAL MECHANICAL CODE	
2018 INTERNATIONAL PLUMBING CODE	
2018 INTERNATIONAL FIRE CODE	
2018 INTERNATIONAL PROPERTY MAINTENANCE CODE	
2012 NFPA 101 LIFE SAFETY CODE	
NFPA 72 NATIONAL FIRE ALARM CODE	
ZONING INFORMATION	
ZONING DESIGNATION: ..... 01 COUNTY	
AND USE DESCRIPTION: ..... N/A	
REQUIRED SETBACKS: ..... N/A	
ALLOWABLE LOT COVERAGE: ..... N/A	
OFF-STREET PARKING REQUIREMENTS: ..... N/A	
OFF-STREET PARKING PROVIDED: ..... N/A	
BUILDING DESCRIPTION	
TYPE OF STRUCTURE: ..... EXISTING TENANT SPACE	
(NEW, EXISTING, OR TENANT SPACE): ..... EXISTING TENANT SPACE	
OCCUPANCY CLASS (IBC CHAPTER 3): ..... B- BUSINESS	
MIN CONSTRUCTION TYPE, PER OCCUPANCY AND AREA: ..... TYPE VB	
ALLOWABLE HEIGHT: ..... 50 FT. (ZONING ORDINANCE) UL IBC	
ACTUAL HEIGHT: ..... 1 STORY	
ALLOWABLE AREA PER PERSON: ..... 150 SF = 19 PERSONS	
RENOVATED AREA: ..... 2,721 SF	
TOTAL TENANT AREA: ..... 16,528 SF	
CONSTRUCTION CLASS: ..... TYPE VB	
PLUMBING FIXTURES( WC/ URINALS ): ..... 1 NEEDED	
PLUMBING LAVATORIES: ..... 1 NEEDED	
PLUMBING SERVICE SINK: ..... 1 NEEDED	
PLUMBING DRINKING FOUNTAIN: ..... 1 NEEDED	

### VICINITY MAP

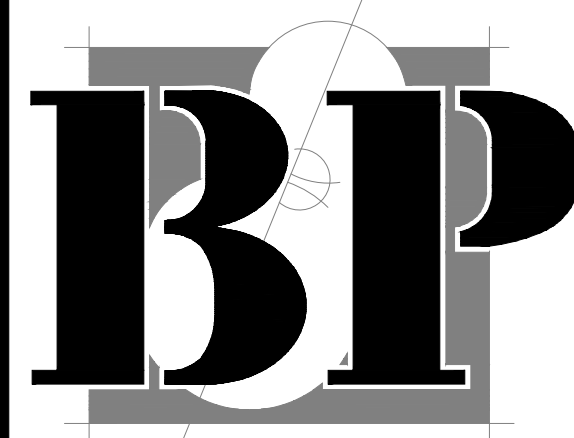




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LEGEND	
	EXISTING 1- HR
	NEW 1- HR

EGRESS LEGEND B Occupancy	
	START LOCATION OF PERSON
	TRAVEL DISTANCE TO EGRESS MAX. TRAVEL DISTANCE: 300 FT COMMON PATH OF TRAVEL (CPT) MAX. COMMON PATH OF TRAVEL: 100' PROTECTED BY SPRINKLER SYSTEM
	PATH OF TRAVEL TO FIRE EXTINGUISHER MAX. DISTANCE: 75'
	AREA NOT IN LIFE SAFETY PLAN
FIRE EXTINGUISHER LEGEND	
	TYPE 2-A (CLASS ABC) MULTI-PURPOSE DRY CHEMICAL WITH RECESSED WALL CABINET LARSON'S CAMEO SERIES AL-C2409-RT
ADA LEGEND	
	5' TURNING CIRCLE



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Contact Name: Art Miller

**Project Name:**

## Anderson County Health Dental Office Renovations

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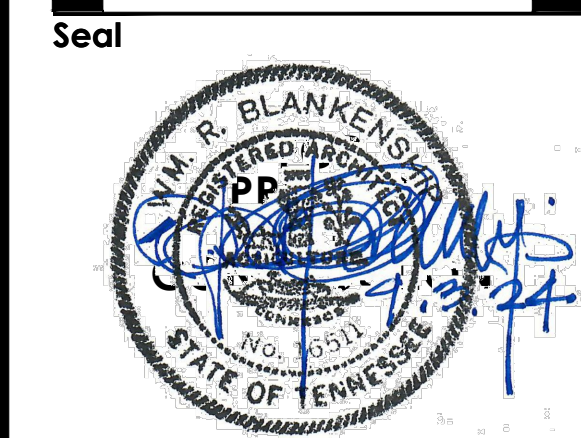
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Date: 9/3/24

Drawn By: BAS + SN

Checked By: BB

Project Number: 21-04.1

**Revisions**

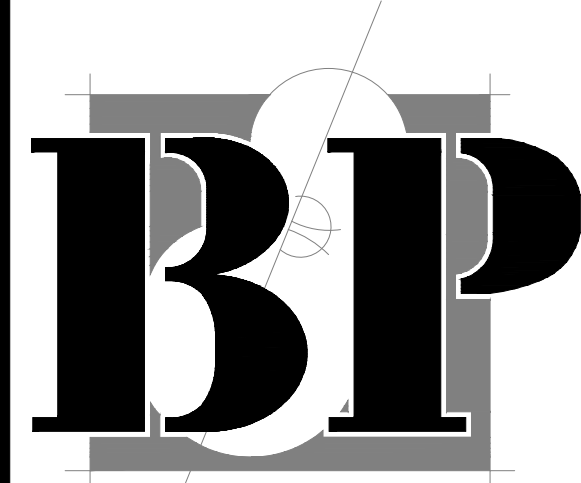
No. Date:

**Drawing Title:**

**Life Safety Plan**

**Drawing No.:**

**LS1.0**



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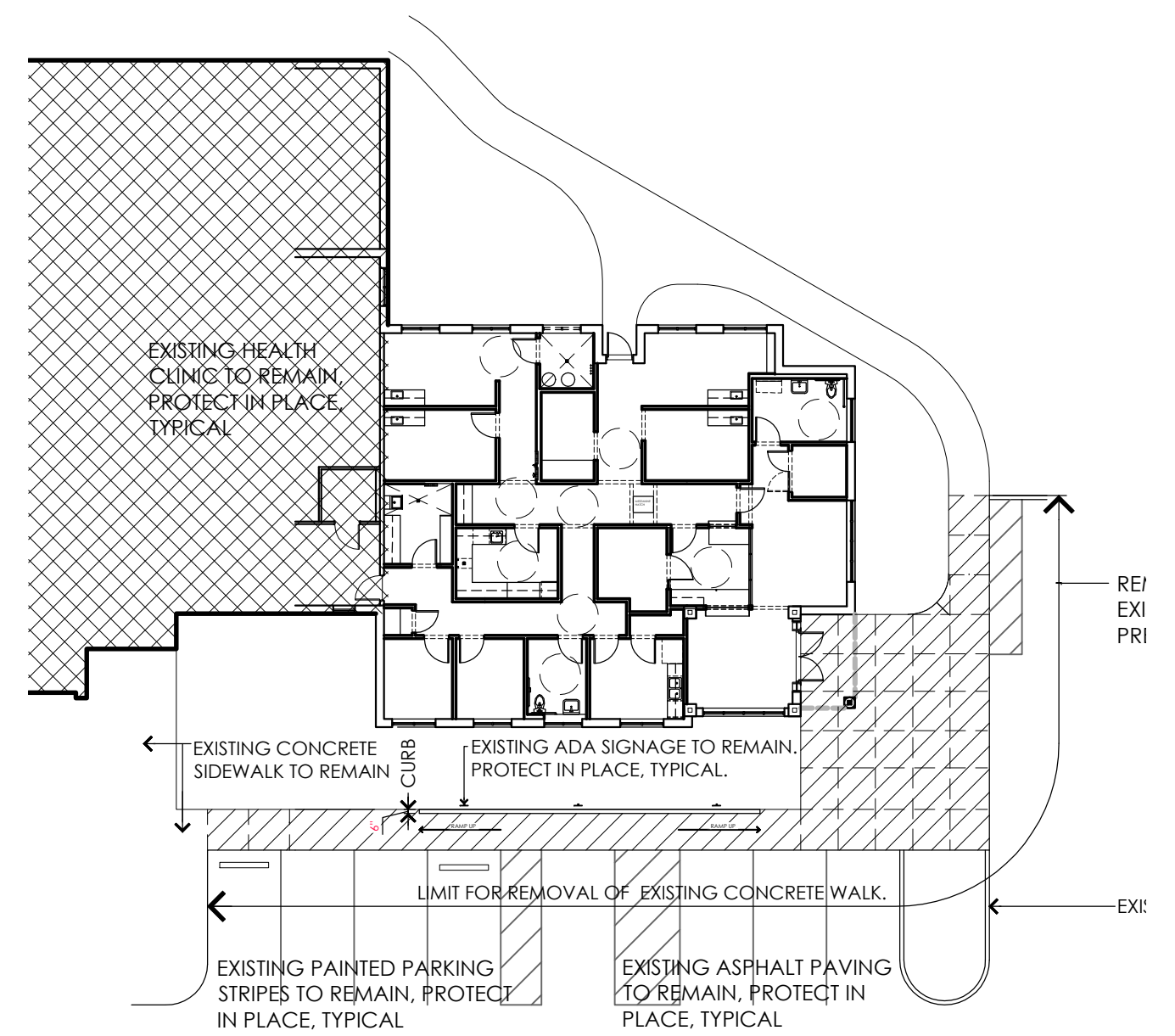
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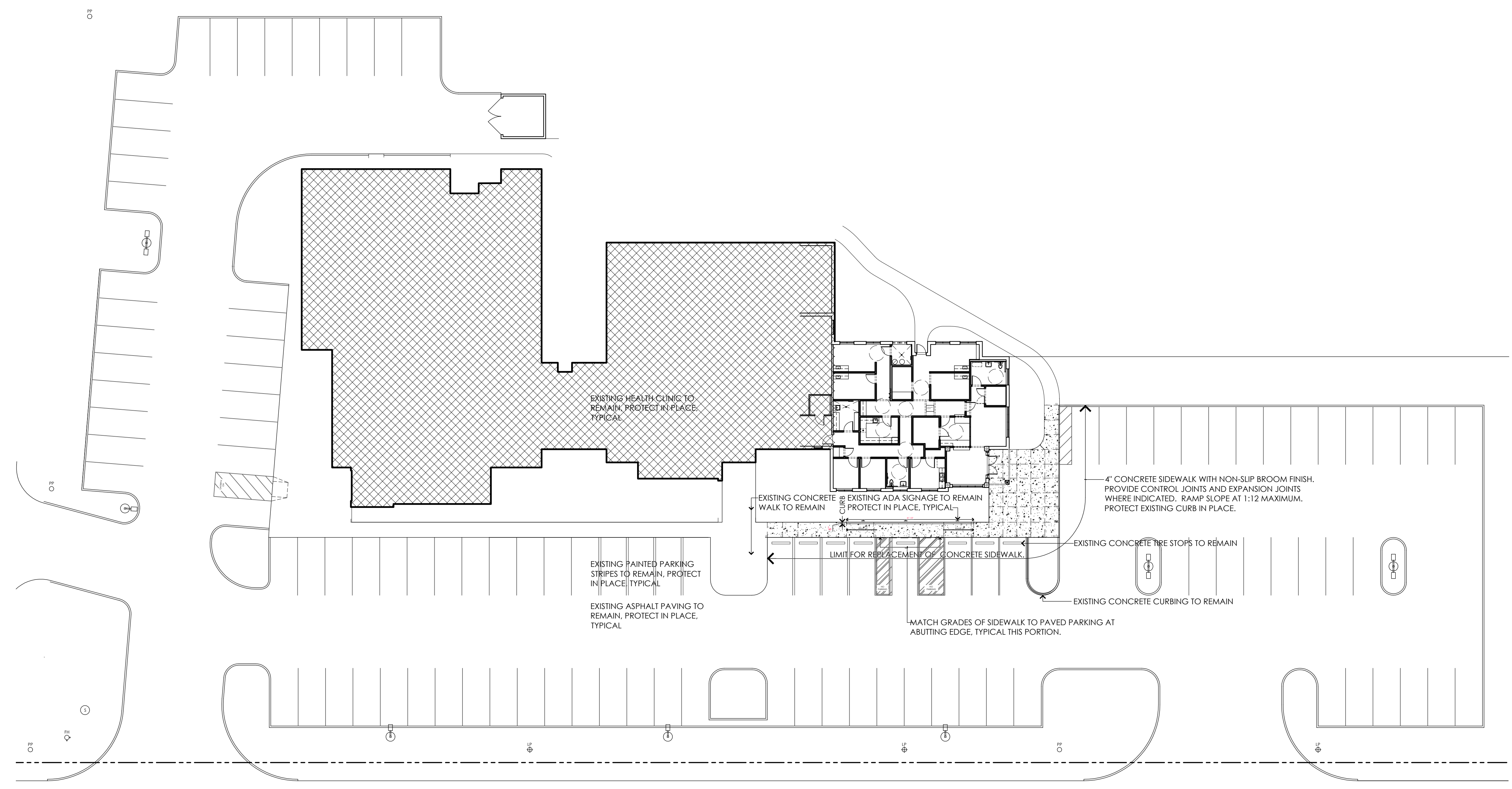
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2 DEMOLITION SITE PLAN  
A0.1 Scale: 1" = 20'

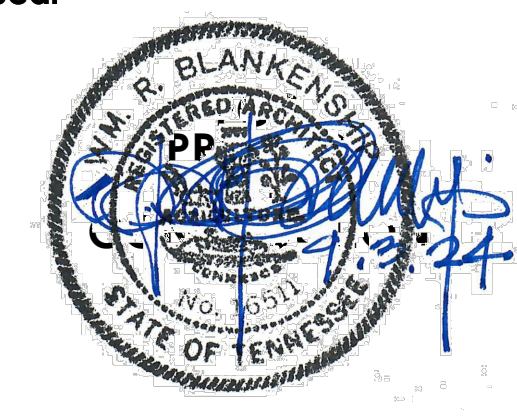


1 SITE PLAN  
A0.1 Scale: 1" = 20'

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Seal



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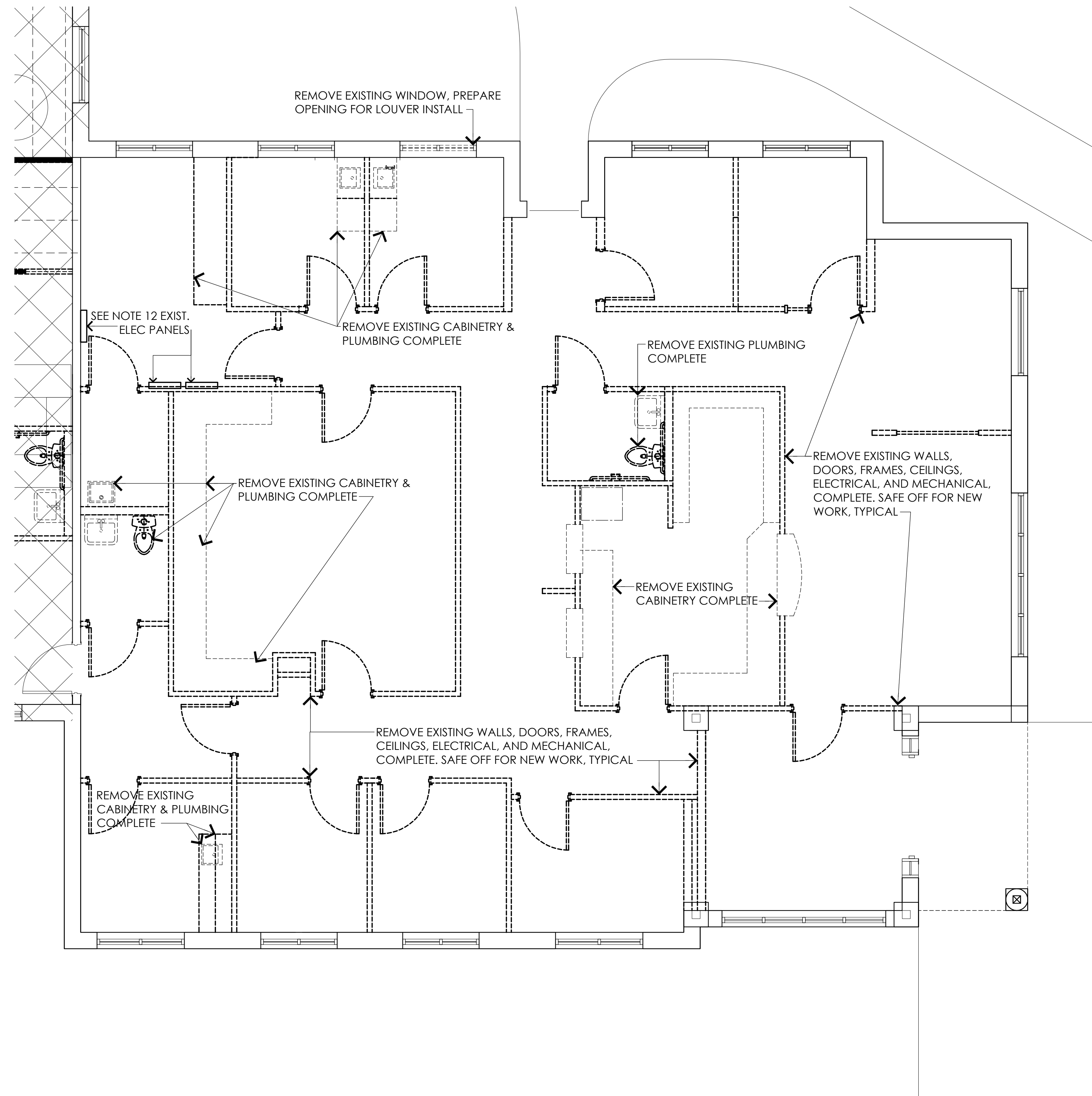
Project Number: 21-04.1

Revisions

No. Date:

Drawing Title:  
Site Plan & Demo Site Plan

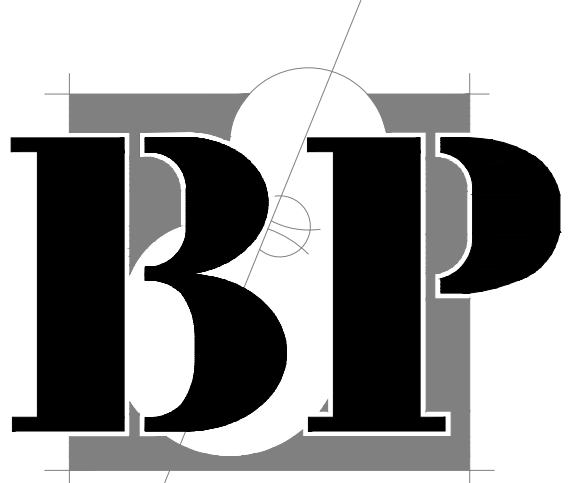
Drawing No.:  
A0.1



1 DEMOLITION FLOOR PLAN  
A1.0 Scale: 1/4" = 1'-0"

**DEMOLITION GENERAL NOTES**

1. FIELD VERIFY ALL DIMENSIONS SHOWN ON THE DRAWINGS. REPORT ERRORS OR INCONSISTENCIES TO THE ARCHITECT PRIOR TO START OF CONSTRUCTION.
2. QUANTITIES OF DEMOLITION WORK SHALL BE DETERMINED BY PERSONAL OBSERVATION OF THE AREAS TO BE RENOVATED. COORDINATE NEW WORK WITH EXISTING PLUMBING, HVAC AND ELECTRICAL AS VERIFIED IN THE AREAS OF WORK AND SAFE OFF EXISTING ITEMS TO REMAIN.
3. PROTECT AREAS NOT INVOLVED IN RENOVATION WORK FROM DAMAGE. DAMAGE CAUSED BY DEMOLITION WORK WILL BE REPAIRED BY THE CONTRACTOR AT NO ADDITIONAL COST TO OWNER.
4. CONTRACTOR SHALL LIMIT THE SPREAD OF DUST AND DIRT THROUGH THE USE OF ENCLOSURES & OTHER SUITABLE METHODS. THESE BARRIERS OR METHODS SHOULD COMPLY WITH GOVERNING REGULATIONS FOR INDOOR AIR QUALITY AND ENVIRONMENTAL PROTECTION.
5. COORDINATE WITH THE OWNER/ARCHITECT REMOVAL, REPLACEMENT AND/OR REUSE OF EXISTING EQUIPMENT OR MATERIALS PRIOR TO DEMOLITION.
6. COORDINATE DEMOLITION SCHEDULE DAYS AND TIMES WITH THE OWNER 48 HOURS PRIOR TO COMMENCEMENT OF WORK.
7. CONTRACTOR TO REPAIR DAMAGES TO WORK REMAINING IN PLACE, CAUSED BY DEMOLITION WORK. SUCH REPAIRS ARE TO BE DONE ACCORDING TO THE SPECIFICATION FOR CUTTING & PATCHING, MATCH ADJACENT FINISHES AND QUALITY AT NO ADDITIONAL COST TO OWNER.
8. THE CONTRACTOR SHALL OBSERVE EXISTING CONDITIONS & TAKE PRECAUTIONS AS NECESSARY WHEN REMOVING EXISTING WALLS. THIS COULD INCLUDE THE PLACEMENT OF TEMPORARY SHORING TO SUPPORT THE BUILDING STRUCTURE UNTIL NEW SUPPORTING CONSTRUCTION IS IN PLACE.
9. INTERFACE DEMOLITION WORK REQUIRED TO INSTALL ALL NEW WORK.
10. REPAIR, LEVEL, SMOOTH AND CLEAN THE FLOOR, CEILING, AND ALL SURFACES AFFECTED BY THE DEMOLITION WORK TO RECEIVE NEW FINISHES.
11. REMOVE RUBBISH, DEBRIS & OTHER SUBSTANCES CREATED BY THE DEMOLITION WORK. DISPOSE MATERIALS IN ACCORDANCE WITH CURRENT CODES AND ENVIRONMENTAL LAWS.
12. WHEN DEMOLISHING PARTITIONS IN THE AREA OF EXISTING EQUIPMENT OR PANELS, THE PART OF THE WALL THAT SUPPORTS THE EQUIPMENT OR PANEL SHALL REMAIN, BE PROTECTED FROM DEMOLITION & MAINTAIN ITS STRUCTURAL STABILITY.



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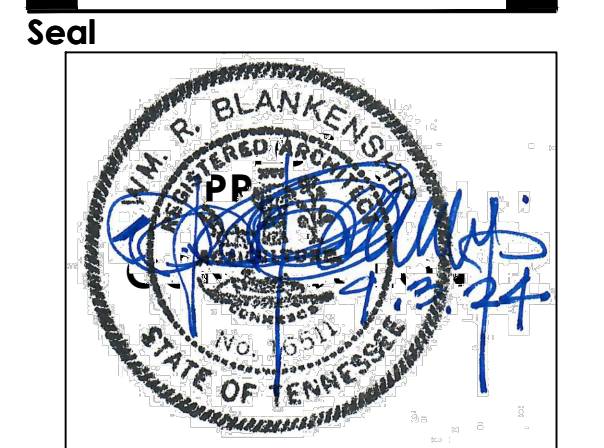
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Checked By: BB

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**Revisions**

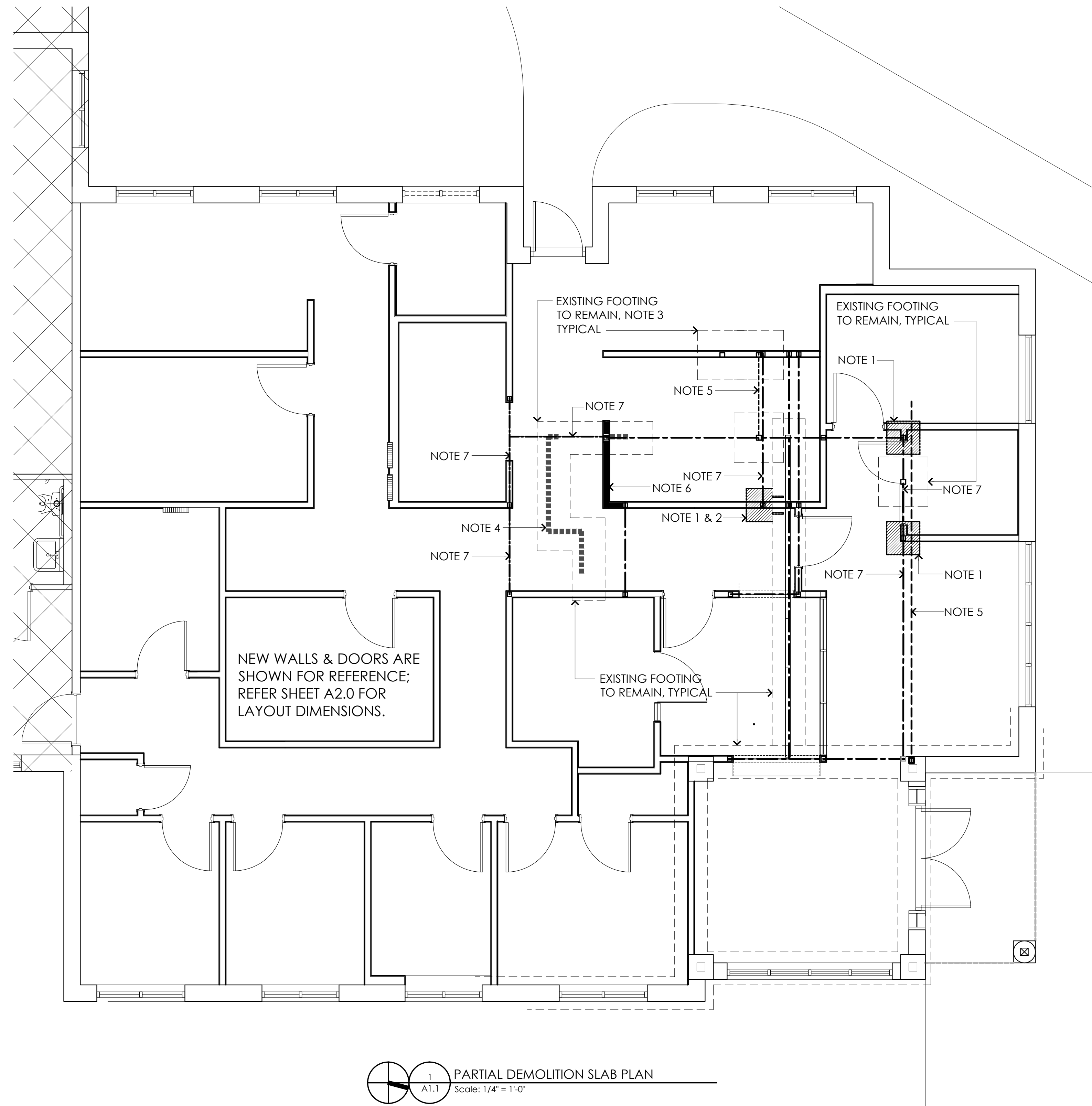
No. Date:

**Drawing Title:**

Demolition Floor Plan

**Drawing No.:**

**A1.0**

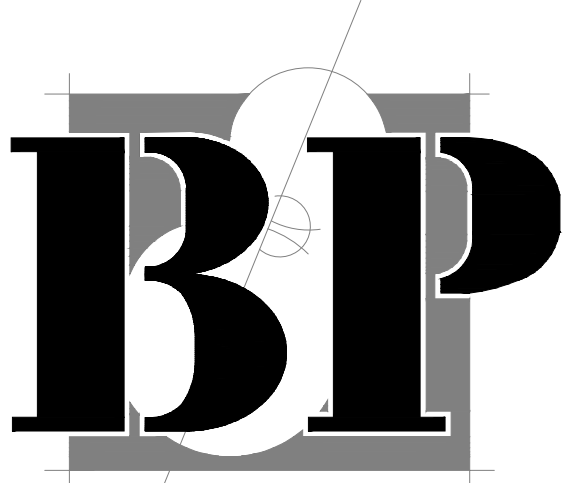


- NOTES**
1. CONCRETE FOOTING, WITH 2-#5, TYPICAL
  2. DRILL 3/8" HOLE, EPOXY 12' LONG X 3/8" REBAR EXISTING FOOTING TO REMAIN, TYPICAL
  3. EXISTING FOOTING TO REMAIN, TYPICAL
  4. DEMO EXISTING BEARING WALL
  5. DEMO EXISTING COLUMNS & BEAM BEARING WALL
  6. BEARING WALL
  7. COLUMN & BEAM

**SLAB DEMOLITION GENERAL NOTES**

1. THE CONTRACTOR SHALL FIELD VERIFY LOCATIONS OF EXISTING PIPING. DRAWINGS SHOW APPROXIMATE LOCATIONS.
2. CHECK STRUCTURAL DRAWINGS FOR SIZE AND DEPTH OF NEW FOOTINGS BEFORE DEMOLITION OF SLAB AREA FOR FOOTINGS..
3. CHECK DENTAL EQUIPMENT VENDOR DRAWINGS FOR SIZE AND LOCATION OF TRENCHES FOR EQUIPMENT.
4. LEVEL SLAB IN AREAS AROUND DENTAL CHAIRS TO INSURE MOUNTING OF CHAIR WILL BE LEVEL. SEE DENTAL EQUIPMENT DRAWINGS FOR LEVEL REQUIREMENT.
5. SAW CUT ALL AREAS THAT REQUIRE SLAB REMOVAL. CUTS ARE CLEAN WITH NO RAGGED EDGES. CUT THROUGH ENTIRE SLAB CLEANLY.
6. BEFORE CUTTING SLAB CHECK FOR UNDER-SLAB UTILITIES.

**PARTIAL DEMOLITION SLAB PLAN**  
 Scale: 1/4" = 1'-0"



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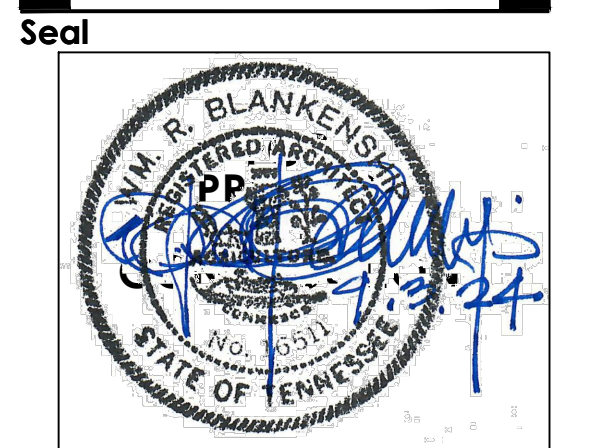
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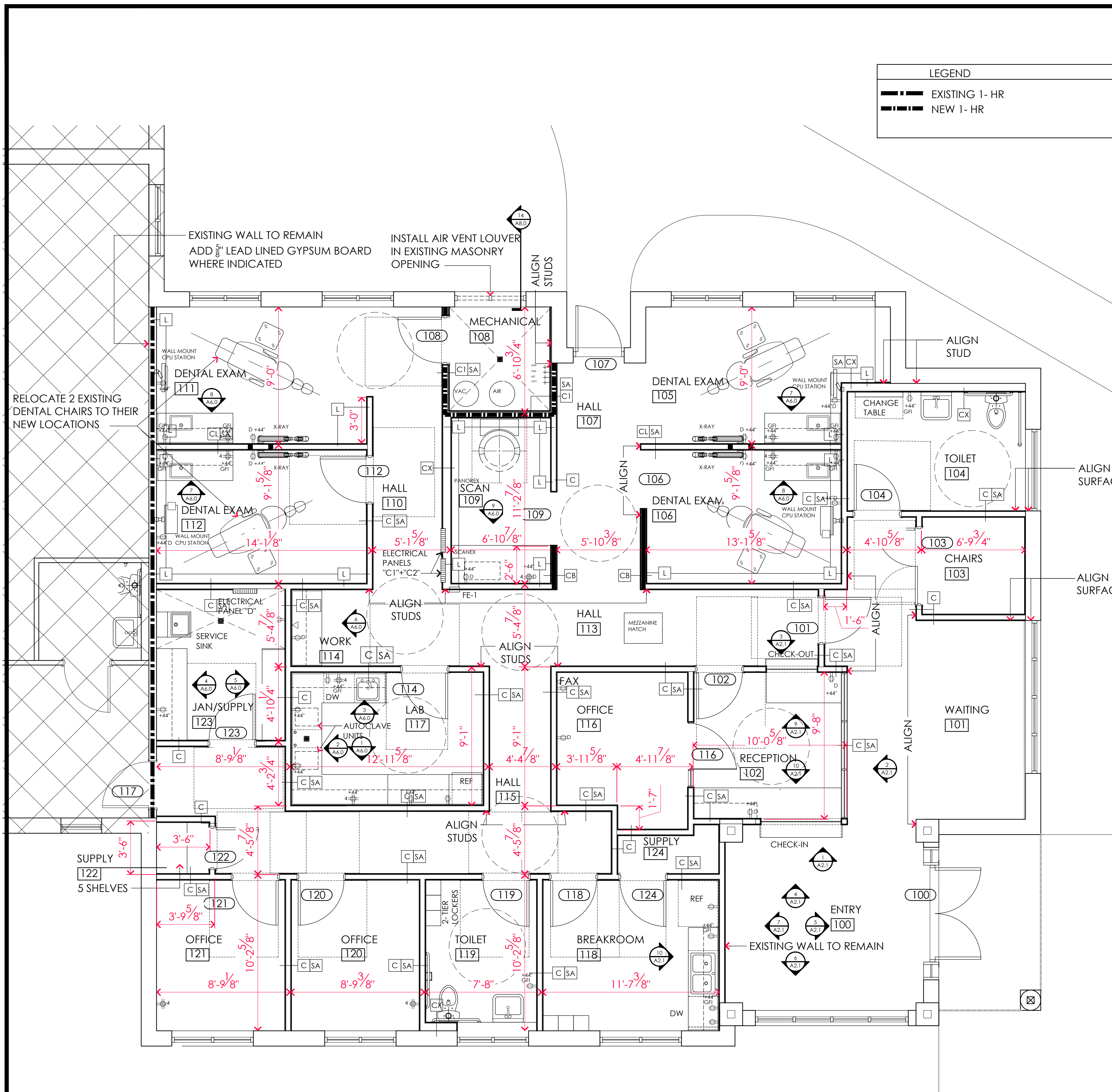
**Drawing Title:**

Partial Demolition Slab

**Drawing No.:**

# A1.1

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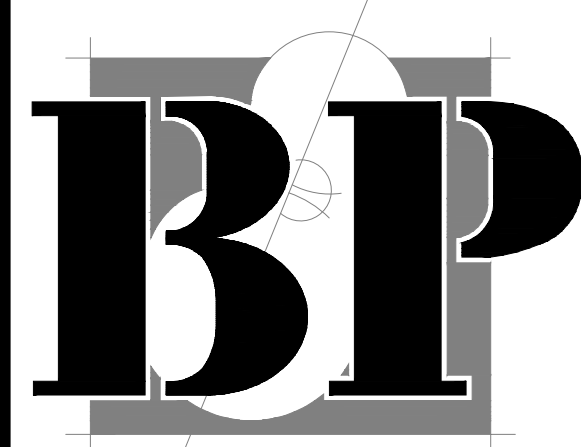
**FLOOR PLAN**  
Scale: 1/4" = 1'-0"

**WALL SECTION + PARTITION LEGEND**

SECTION	GRAPHIC	DESCRIPTION	RATING
1 A5.0		3 1/2" STEEL STUDS GA 20 AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD ON EACH SIDE. EXTEND TO BOTTOM STRUCTURE ABOVE.	NOT RATED
2 A5.0		3" STEEL STUDS GA 20 AT 16" O.C. WITH ONE (1) LAYER OF LEAD LINED 5/8" GYPSUM BOARD ON EACH SIDE. EXTEND TO STRUCTURE ABOVE.	NOT RATED
3 A5.0		3" STEEL STUDS GA 16 AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD ON EACH SIDE. EXTEND TO BOTTOM OF DECK ABOVE AND SEAL WITH CAULK AT STRUCTURE.	BEARING WALL
4 A5.0		3" STEEL STUDS GA 20 AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD ON EACH SIDE. EXTEND TO BOTTOM OF DECK ABOVE AND SEAL WITH NON-COMBUSTIBLE SEALANT. UL DETAIL 419	1 HOUR
5 A5.0		6" STEEL STUDS AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD ON ONE SIDE @ EXTERIOR WALL AND (1) LAYER EACH SIDE @ INTERIOR CONDITION. EXTEND TO STRUCTURE ABOVE.	NOT RATED
		ADD 3" MIN SOUND ATTENUATION BLANKETS WITHIN PARTITION TYPE. CONTINUE FROM FLOOR TO TOP OF PARTITION.	NOT RATED
		ON EQUIPMENT SIDE OF WALL USE LEAD LINED 5/8" GYPSUM BOARD. LEAD LINED GYPSUM TO EXTEND 8" MINIMUM FROM FLOOR.	NOT RATED

**GENERAL NOTES**

- CONTRACTOR SHALL FIELD VERIFY ALL DIMENSIONS & ELEVATIONS OF EXISTING CONDITIONS AFFECTING THIS PROJECT. PRIOR TO FABRICATION OR INSTALLATION OF NEW WORK. NOTIFY THE ARCHITECT OF ANY DISCREPANCIES FROM DIMENSIONS SHOWN, NOTED, OR REQUIRED.
- DO NOT SCALE DRAWINGS. IF DIMENSIONS ARE IN QUESTION, THE CONTRACTOR SHALL OBTAIN CLARIFICATION, IN WRITING, FROM THE ARCHITECT BEFORE CONTINUING WITH CONSTRUCTION.
- DIMENSIONS ARE TO FACE OF STUD AND FACE OF CONCRETE OR MASONRY UNLESS OTHERWISE NOTED. DIMENSIONS NOTED AS CLEAR "CLR" ARE FINISH TO FINISH UNLESS NOTED OTHERWISE ON FLOOR PLANS, ENLARGED PLANS, OR WALL SECTIONS.
- WHERE A DETAIL IS SHOWN OR NOTE IS DESCRIBED FOR ONE CONDITION IT SHALL APPLY FOR ALL LIKE OR SIMILAR CONDITIONS EVEN THOUGH NOT SPECIFICALLY NOTED ON THE DRAWINGS.
- REFER TO PARTITION LEGEND FOR TYPICAL WALL TYPES AND FIRE RATINGS. ALL WALL TYPES SHALL CONFORM TO THE PARTITION LEGEND UNLESS INDICATED OTHERWISE ON FLOOR PLANS, ENLARGED PLANS OR WALL SECTIONS.
- ALL FIRE RATED AND SMOKE PARTITIONS SHALL EXTEND TO THE UNDERSIDE OF THE STRUCTURAL DECK AND BE SEALED TIGHTLY WITH NON-COMBUSTIBLE SEALANT. ALL FIRE RATED AND SMOKE WALLS SHALL BE LABELED ABOVE CEILING WITH PAINTED STENCILING AS REQUIRED BY CODE.
- ALL PENETRATIONS OF FIRE RATED WALLS, FLOOR/CEILING ASSEMBLIES AND ROOF/CEILING ASSEMBLIES BY ELECTRICAL CABLES, CABLE TRAYS, ELECTRICAL CONDUIT, MECHANICAL PIPING OR PLUMBING PIPING SHALL BE PROTECTED BY THROUGH PENETRATION FIRE STOP SYSTEMS AS TESTED BY RECOGNIZED TESTING LABORATORIES IN ACCORDANCE WITH UL 1479 "FIRE TESTS OF THROUGH PENETRATION FIRE STOPS."
- REFER TO MECHANICAL, ELECTRICAL AND PLUMBING DRAWINGS FOR LOCATIONS OF EQUIPMENT.
- FIELD VERIFY ALL DIMENSIONS PRIOR TO FABRICATION OF ANY MILLWORK OR COUNTERS.
- PROVIDE FIRE RETARDANT TREATED WOOD BLOCKING UNLESS NOTED OTHERWISE FOR ALL WALL MOUNTED MILLWORK, SHELVES, EQUIPMENT, COAT RODS, ETC., AND GROUNDS FOR ALL ACCESSORIES, EQUIPMENT, AND DEVICES SPECIFIED UNDER THE CONTRACT AND AS INDICATED FOR INSTALLATION OF EQUIPMENT BY OTHERS OR TO BE PROVIDED BY OWNER.
- ALL EXPOSED WELDED JOINTS ARE TO BE GROUND TO A SMOOTH FINISH.
- PROVIDE CONTINUOUS SEPARATION BETWEEN DISSIMILAR MATERIALS AS REQUIRED TO PREVENT GALVANIC CORROSION.
- FOR ALL WALL PARTITION OPENINGS REQUIRED FOR MECHANICAL, PLUMBING, AND ELECTRICAL WORK, PROVIDE UNTELS SIZED IN ACCORDANCE WITH SCHEDULE SHOWN ON DRAWINGS.
- ALL INTERIOR FINISHES ARE REQUIRED TO HAVE A MINIMUM CLASS C FLAME SPREAD AND SMOKE-DEVELOPED INDEX WHEN TESTED IN ACCORDANCE WITH ASTM E 84 OR UL 723.
- PROVIDE & INSTALL FIRE OR SMOKE DAMPERS AT ALL OPENINGS OR DUCTS PASSING THROUGH DESIGNATED FIRE OR SMOKE PARTITIONS.
- CONTRACTOR SHALL COMPLY WITH LOCAL, STATE, AND FEDERAL CODES AND ORDINANCES.
- REPRODUCTION OF ARCHITECTURAL DRAWINGS FOR SHOP DRAWINGS IS NOT PERMITTED.
- FIELD MEASUREMENTS: WHERE WORK IS INDICATED TO FIT TO OTHER CONSTRUCTION, VERIFY DIMENSIONS OF OTHER CONSTRUCTION BY FIELD MEASUREMENTS BEFORE FABRICATION, AND INDICATE MEASUREMENTS ON SHOP DRAWINGS. COORDINATE FABRICATION SCHEDULE WITH CONSTRUCTION PROGRESS TO AVOID DELAYING WORK. IF WORK PROCEEDS WITHOUT FIELD MEASUREMENTS, THE CONTRACTOR ASSUMES RESPONSIBILITY FOR ANY CORRECTIVE ACTION NECESSARY FOR COORDINATION OF ALL THE WORK.
- PRIOR TO INSTALLATION**, ALL PROPOSED ROOF PENETRATIONS MUST BE SUBMITTED BY THE GENERAL CONTRACTOR TO THE OWNER AND THE OWNER'S ROOFING CONTRACTOR FOR APPROVAL.



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Contact Name: Art Miller

**Project Name:**

**Anderson County Health Dental Office Renovations**

**Consultants:**

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Contact Name: Mary French-Ewers, P.E., S.E.

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Contact Name: Chris Loy, V.P.

**Seal**



Date: 9/3/24

Drawn By: BAS + SN

Checked By: BB

Project Number: 21-04.1

**Revisions**

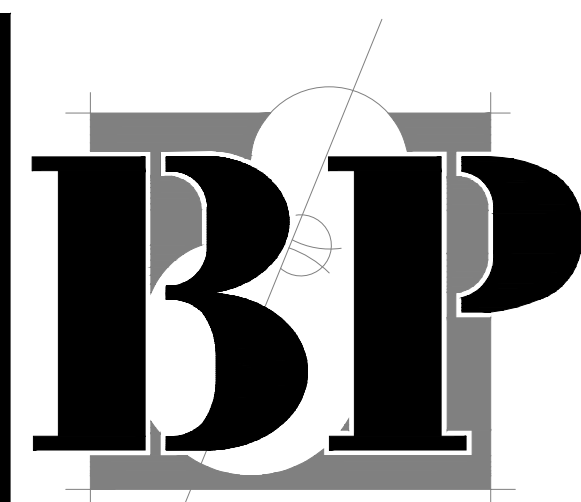
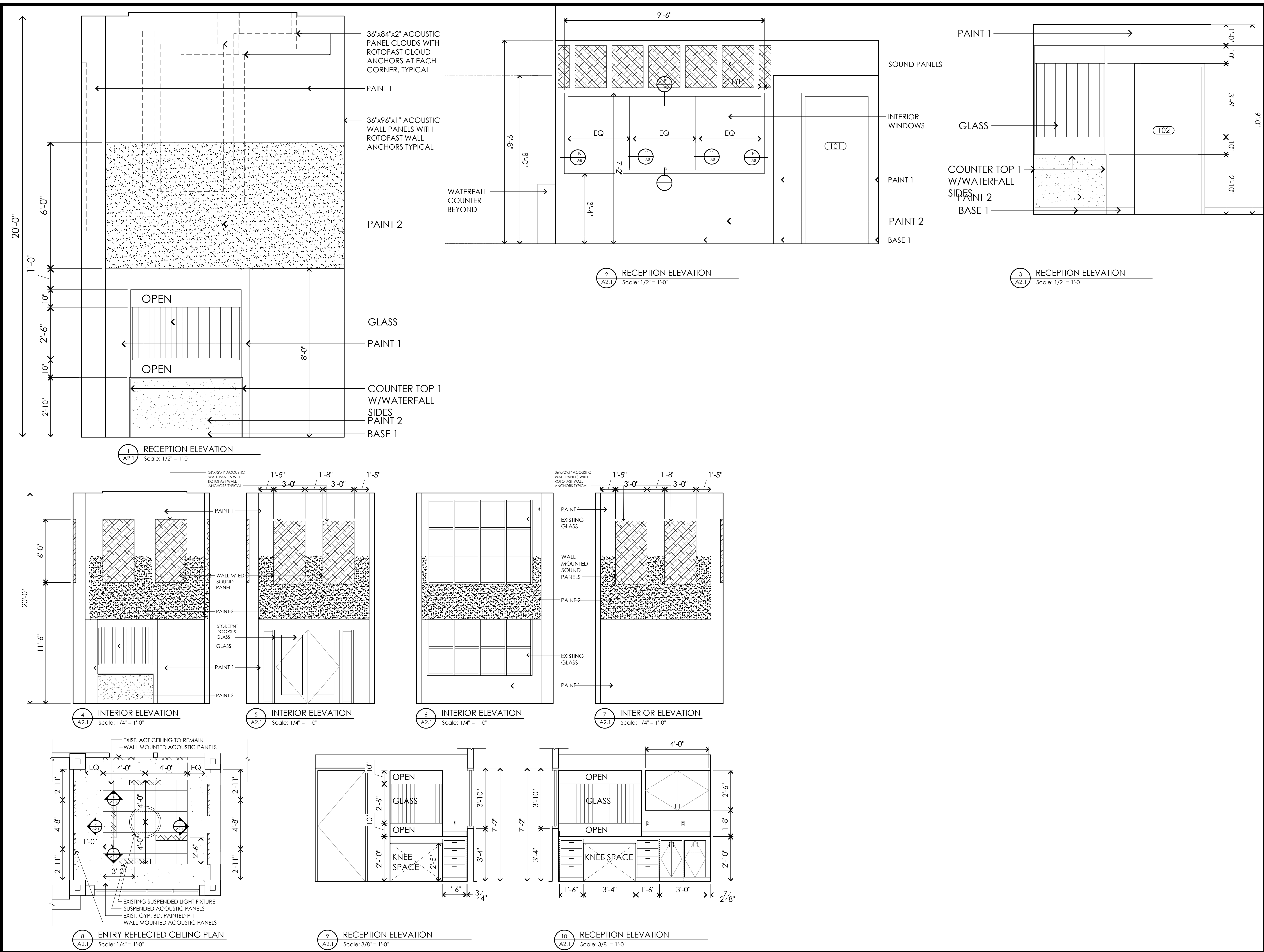
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**Drawing Title:**

**Floor Plan**

**Drawing No.:**

**A2.0**



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**Project Name:**

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Contact Name: Chris Loy, V.P.

Date: 9/3/24

Drawn By: BAS + SN

Checked By: BB

Project Number: 21-04.1

**Revisions**

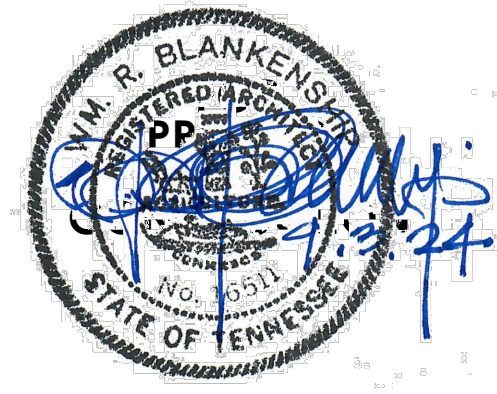
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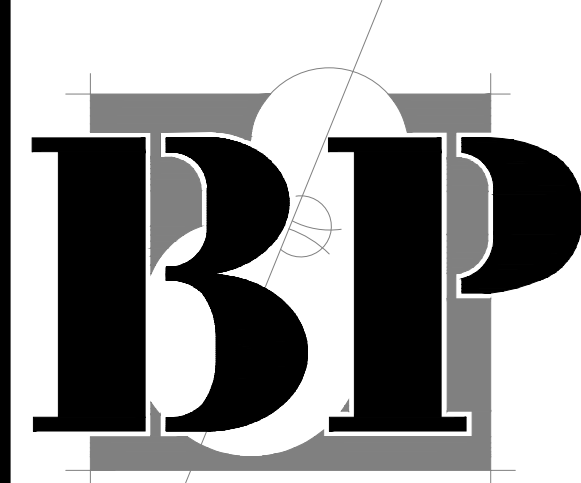
Enlarged Floor Plans & Elevations

**Drawing No.:**

**A2.1**







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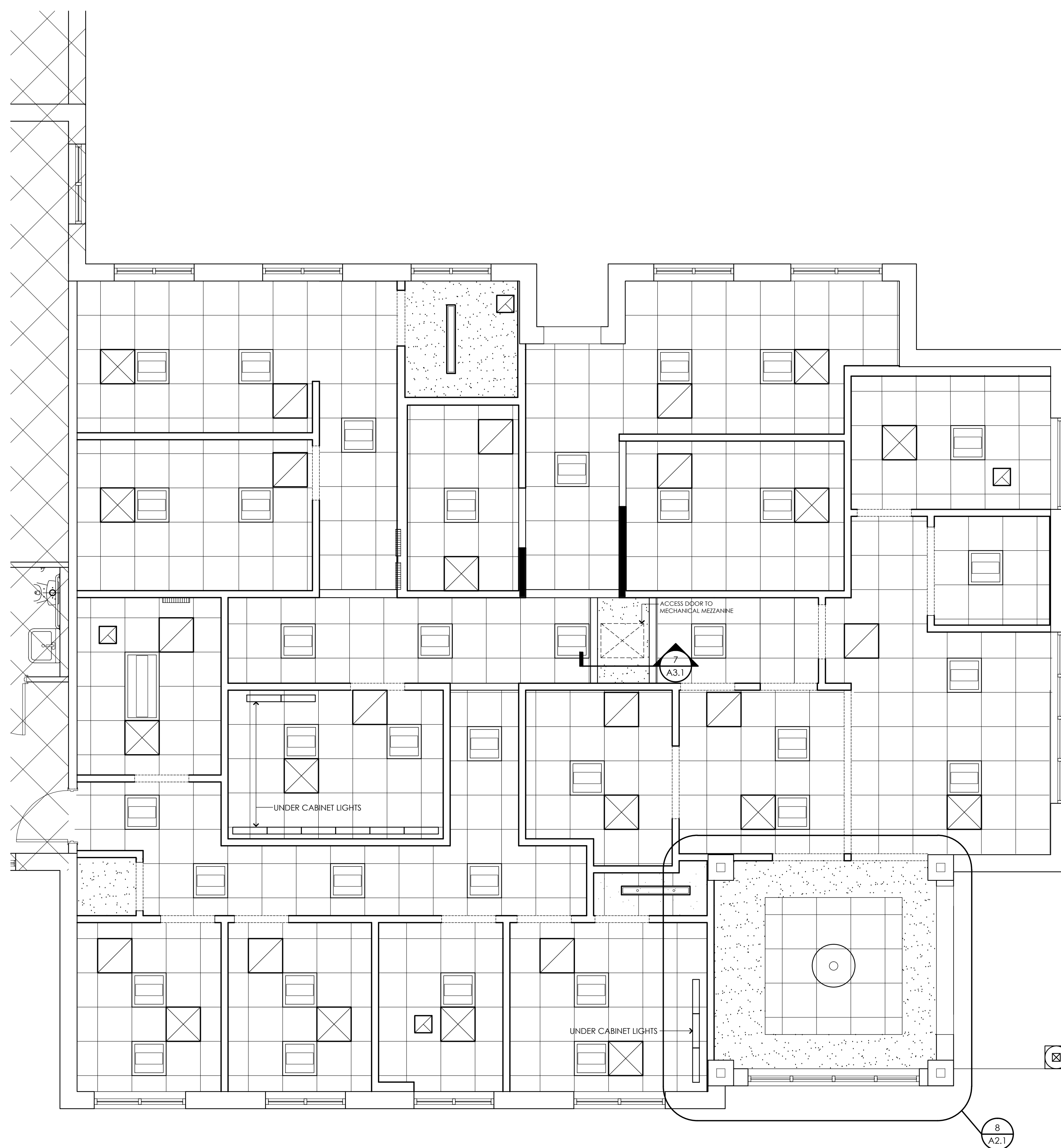
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Contact Name: Chris Loy, V.P.

- NOTES:
1. LIGHT LOCATIONS TO BE COORDINATED W/HVAC DUCTS TO ENSURE ADEQUATE SPACE.
  2. 1/2" CAULK JOINT WHEREVER GYPSUM BOARD MEETS STRUCTURE.
  3. HVAC SUPPLIES, RETURNS, SPRINKLER HEADS, & LIGHT FIXTURES ADJACENT TO ONE ANOTHER SHALL BE 24" ON CENTER AND ALIGNED, U.N.O.
  4. CENTER GRID IN SPACE UNLESS NOTED OTHERWISE
  5. CENTER SPRINKLER HEADS, OCCUPANCY SENSORS, EXHAUST FANS, AND SMOKE DETECTORS IN CLG PANELS TYPICAL.
  6. PAINT ALL EXISTING GYPSUM BOARD CEILING THAT ARE TO REMAIN.

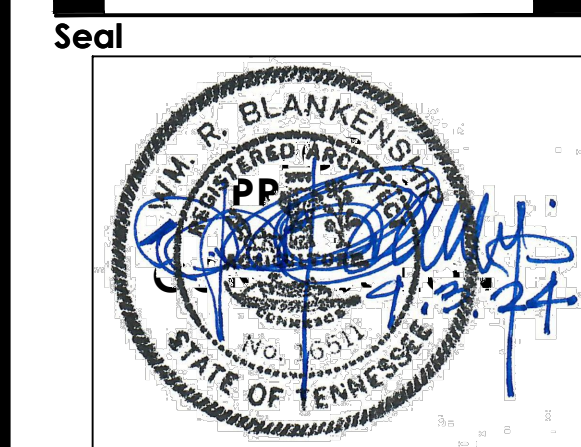
- LEGEND:
- ACT-1: ACOUSTICAL TILE CEILING SYSTEM
  - GYPSUM BOARD CEILING
  - 2'x4' RECESSED LED LIGHT DIRECT/INDIRECT FIXTURE
  - 2'x2' RECESSED LED LIGHT DIRECT/INDIRECT FIXTURE
  - 6'x4' SURFACE MOUNTED LED LIGHT FIXTURE
  - 6'x4' PENDANT LED LIGHT FIXTURE
  - UNDER CABINET LIGHTING
  - COVE LIGHTING
  - EXIT LIGHT FIXTURE, NEW DIRECTIONAL EXIT LIGHT FIXTURE
  - 2'x2', 1'x1' AIR SUPPLY GRILL
  - 2'x2', 1'x1' AIR RETURN GRILL
  - EXHAUST GRILL
  - WALL-MOUNTED FIRE ALARM VISUAL STROBE UNIT
  - SMOKE DETECTOR
  - OCCUPANCY SENSOR
  - WALL-MOUNTED FIRE ALARM COMBINATION HORN/STROBE UNIT



1 REFLECTED CEILING PLAN  
A3.0 Scale: 1/4" = 1'-0"

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Project Number: 21-04.1

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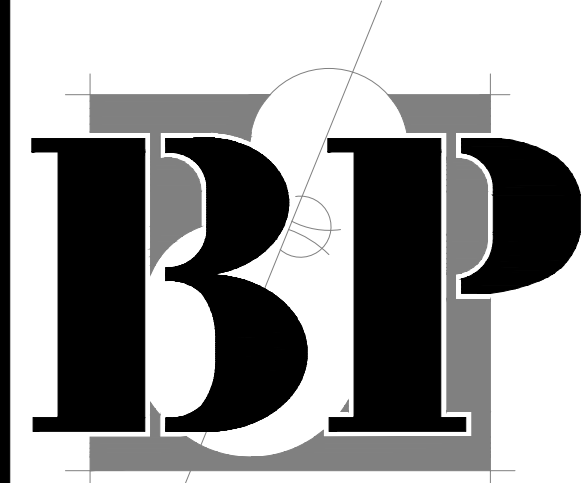
No. Date:

**Drawing Title:**

**Reflected Ceiling Plan**

**Drawing No.:**

**A3.0**



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**Project Name:**

# Anderson County Health Dental Office Renovations

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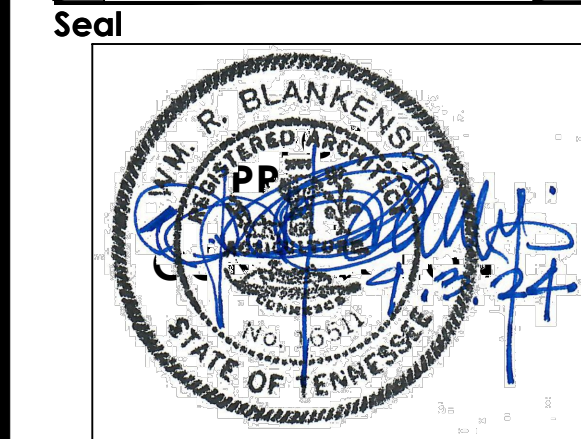
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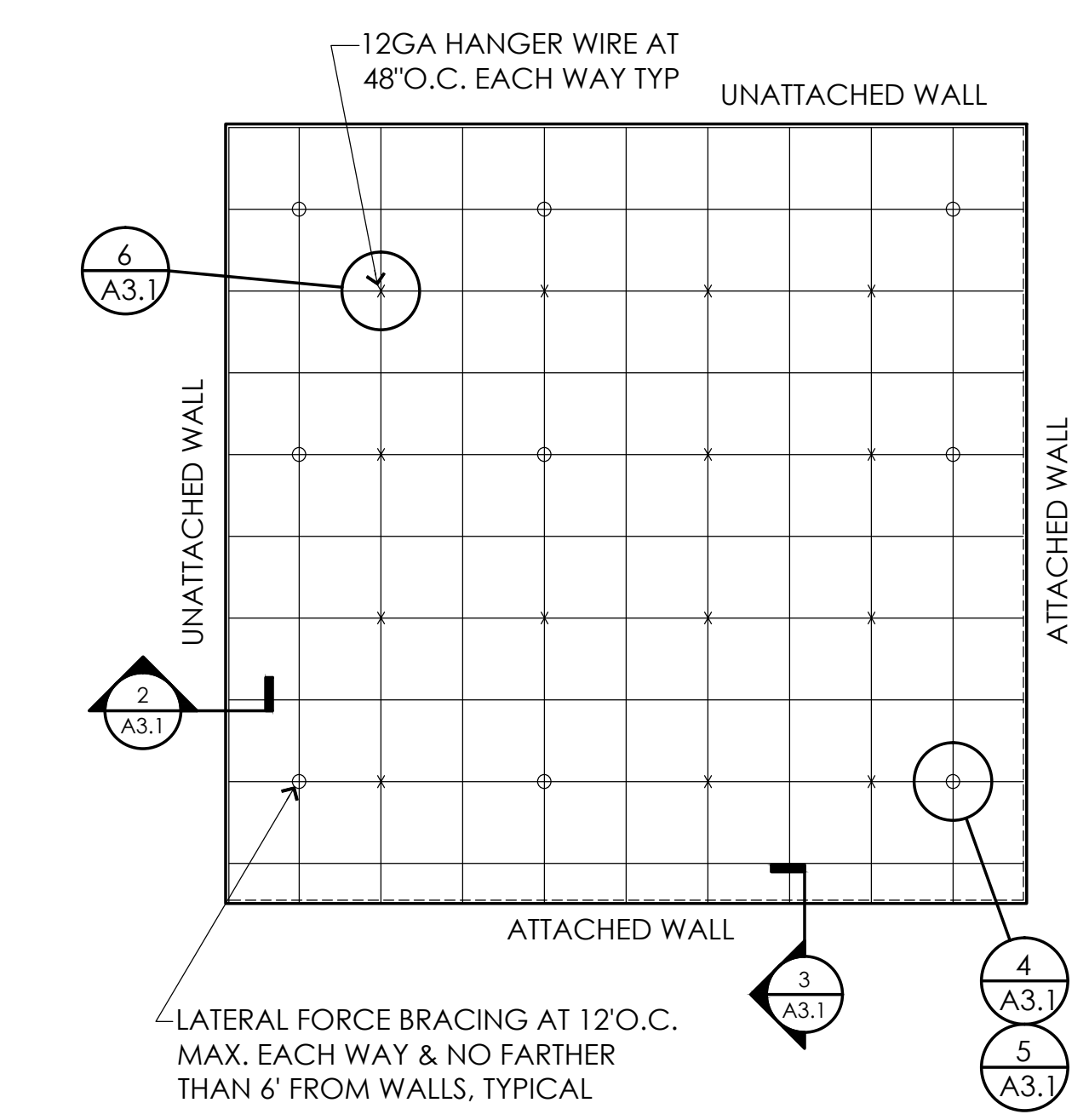
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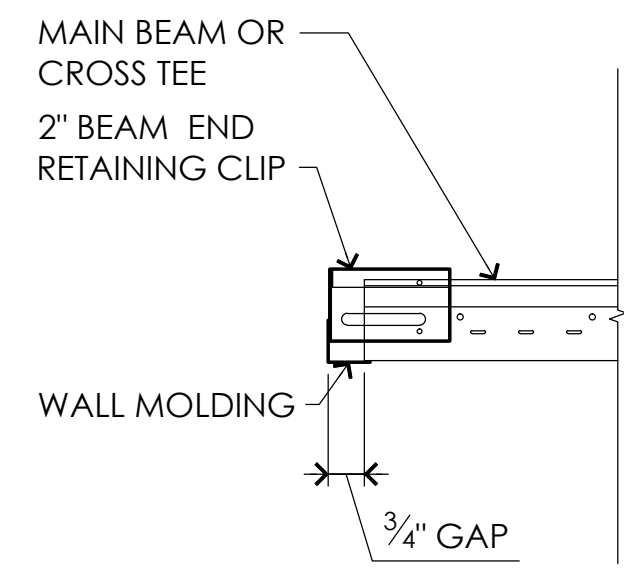
Grid Ceiling Plan & Details

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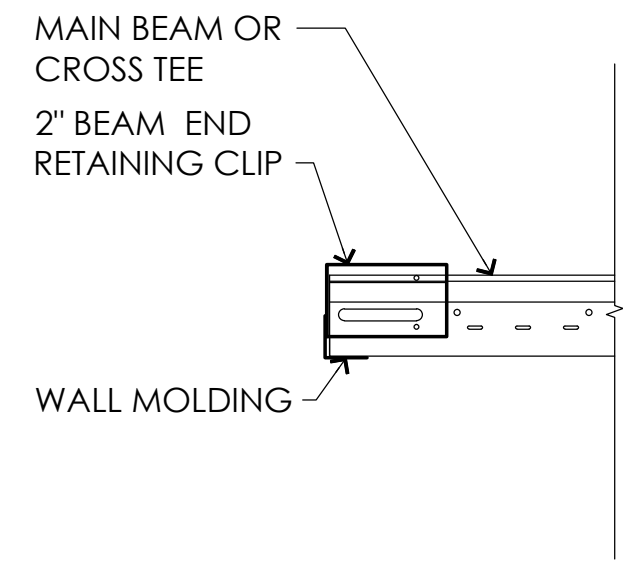
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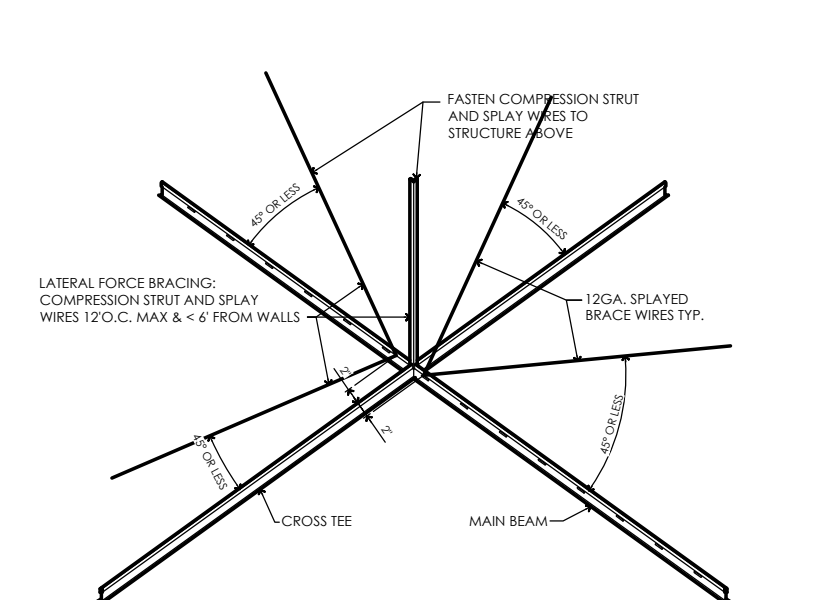
1 LATERAL FORCE BRACING PLAN  
A3.1 Scale: 1/4" = 1'-0"



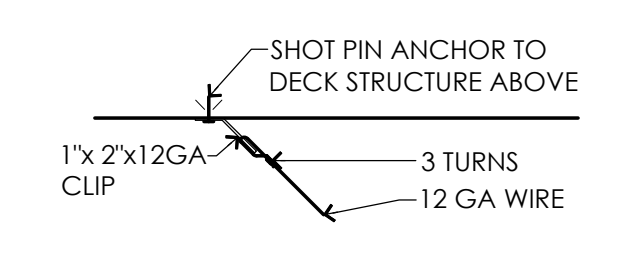
2 GRID DETAIL  
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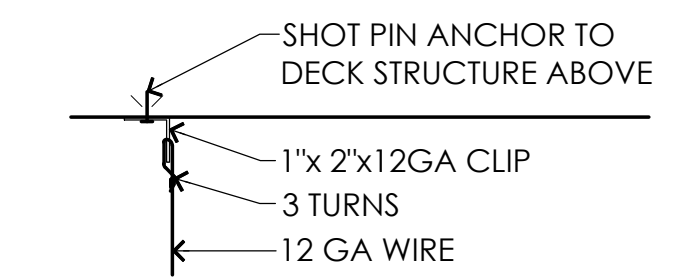
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4 LATERAL FORCE BRACING DETAIL  
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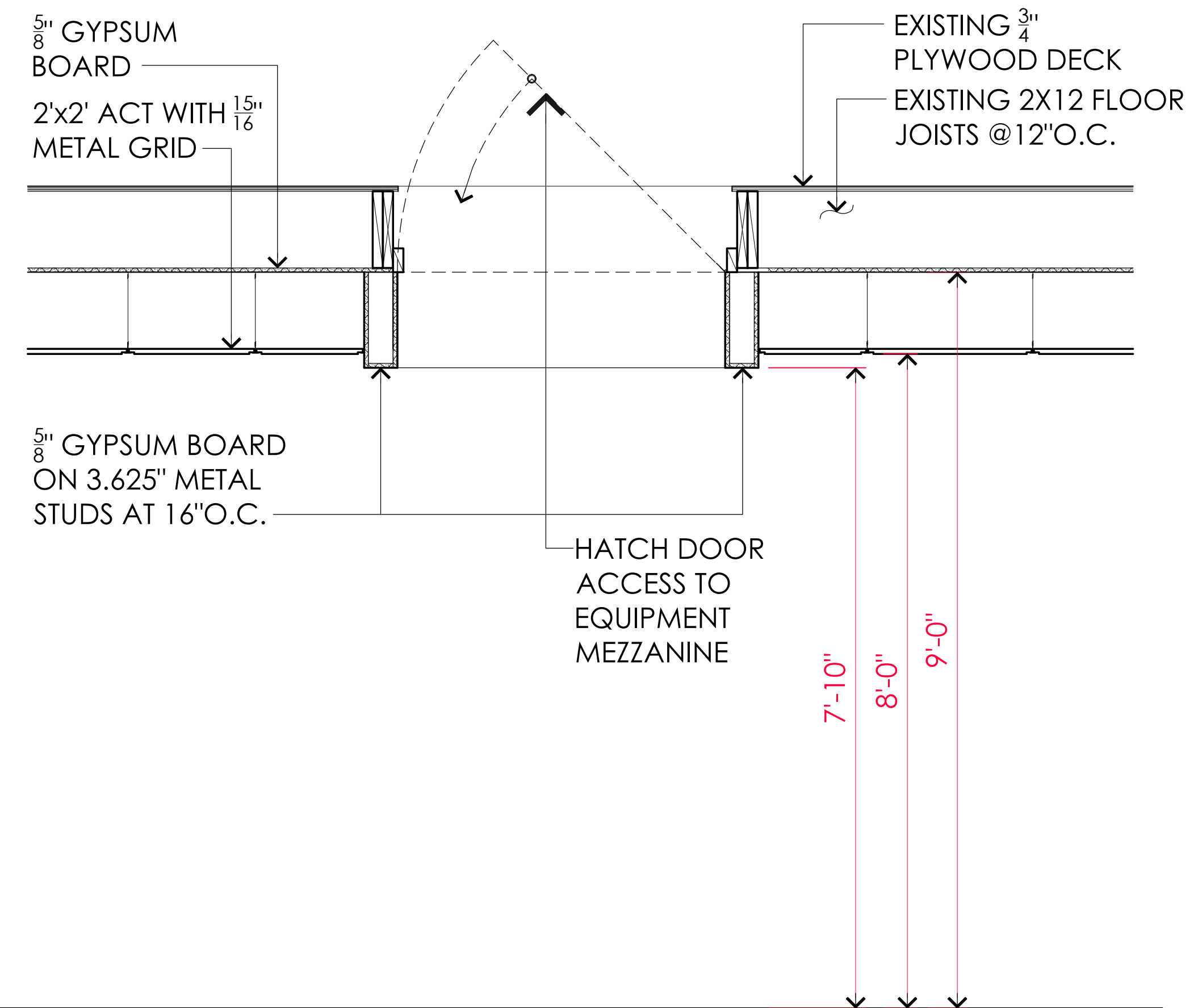


5 SPLAYED SEISMIC WIRE  
A3.1 Scale: 1/2" = 1'-0"



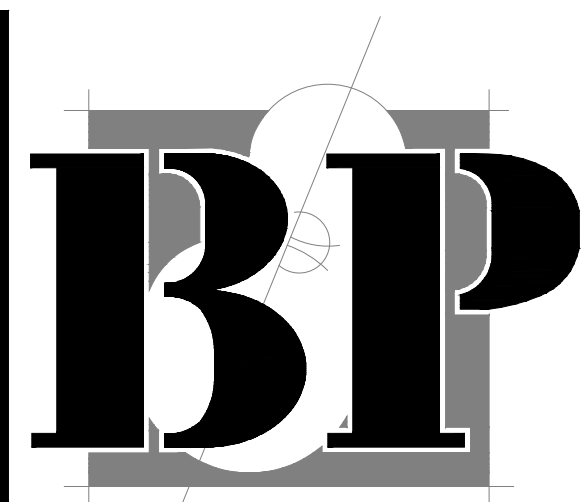
6 VERTICAL HANGER WIRE  
A3.1 Scale: 1/2" = 1'-0"

- GENERAL NOTES**
- SUSPENDED CEILING GRID AND RELATED ITEMS SHALL COMPLY WITH IBC SEISMIC DESIGN CATEGORY D, E, AND F, AND WITH ASTM E580.
  - HANGER WIRES ARE FASTENED TO STRUCTURE ABOVE.
  - PROVIDE 2- 12 GAGE WIRES TO EACH LIGHT FIXTURE AND SECURE TO STRUCTURE ABOVE.
  - COMPRESSION STRUT MAY BE EMT CONDUIT, METAL STUDS, OR A PROPRIETARY COMPRESSION POST.



7 VERTICAL HANGER WIRE  
A3.1 Scale: 3/4" = 1'-0"

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Contact Name: Art Miller

**Project Name:**

**Anderson County Health Dental Office Renovations**

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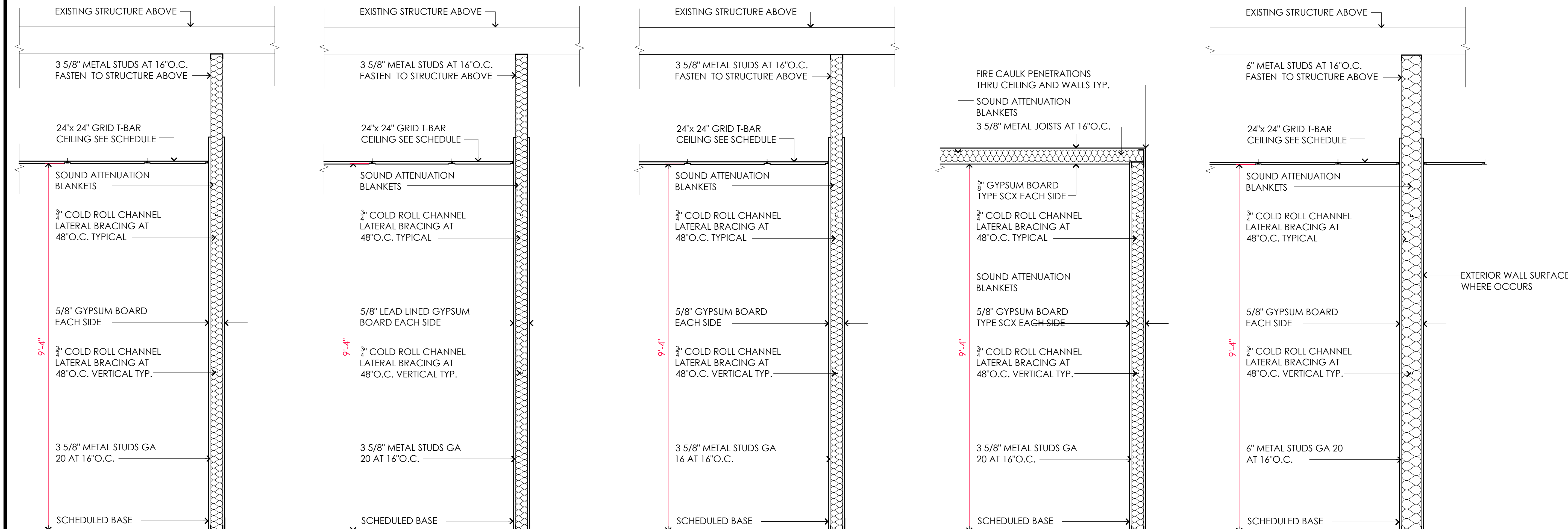
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Contact Name: Chris Lay, V.P.



1 WALL SECTION A5.0 Scale: 3/4" = 1'-0" C

2 WALL SECTION A5.0 Scale: 3/4" = 1'-0" CL

3 WALL SECTION A5.0 Scale: 3/4" = 1'-0" CB

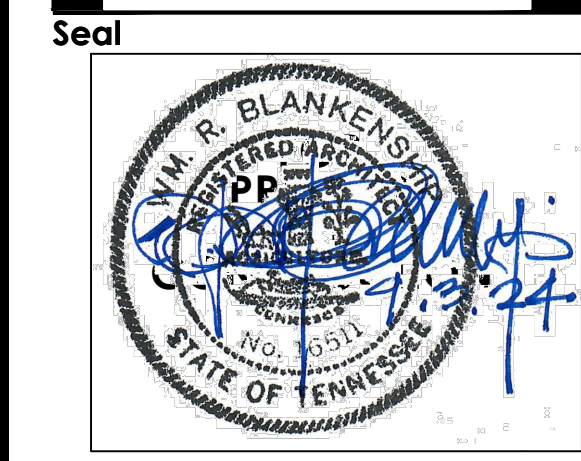
4 WALL SECTION A5.0 Scale: 3/4" = 1'-0" CI

5 WALL SECTION A5.0 Scale: 3/4" = 1'-0" CX

**WALL SECTION + PARTITION LEGEND**

SECTION	GRAPHIC	DESCRIPTION	RATING
1 A5.0	C	3 5/8" STEEL STUDS GA 20 AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD ON EACH SIDE. EXTEND TO BOTTOM STRUCTURE ABOVE.	NOT RATED
2 A5.0	CL	3 5/8" STEEL STUDS GA 20 AT 16" O.C. WITH ONE (1) LAYER OF LEAD LINED 5/8" GYPSUM BOARD ON EACH SIDE. EXTEND TO STRUCTURE ABOVE.	NOT RATED
3 A5.0	CB	3 5/8" STEEL STUDS GA 16 AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD ON EACH SIDE. EXTEND TO BOTTOM OF DECK ABOVE AND SEAL WITH CAULK AT STRUCTURE.	BEARING WALL
4 A5.0	CI	3 5/8" STEEL STUDS GA 20 AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD TYPE SCX ON EACH SIDE. EXTEND TO BOTTOM OF RATED CEILING ABOVE AND SEAL WITH NON-COMBUSTIBLE SEALANT. UL DETAIL 419	1 HOUR
5 A5.0	CX	6" STEEL STUDS AT 16" O.C. WITH ONE (1) LAYER OF 5/8" GYPSUM BOARD ON ONE SIDE @ EXTERIOR WALL AND (1) LAYER EACH SIDE @ INTERIOR CONDITION. EXTEND TO STRUCTURE ABOVE.	NOT RATED
	SA	ADD 3" MIN SOUND ATTENUATION BLANKETS WITHIN PARTITION TYPE. CONTINUE FROM FLOOR TO TOP OF PARTITION.	NOT RATED
	L	ON EQUIPMENT SIDE OF WALL USE LEAD LINED 5/8" GYPSUM BOARD. LEAD LINED GYPSUM TO EXTEND 8' MINIMUM FROM FLOOR.	NOT RATED

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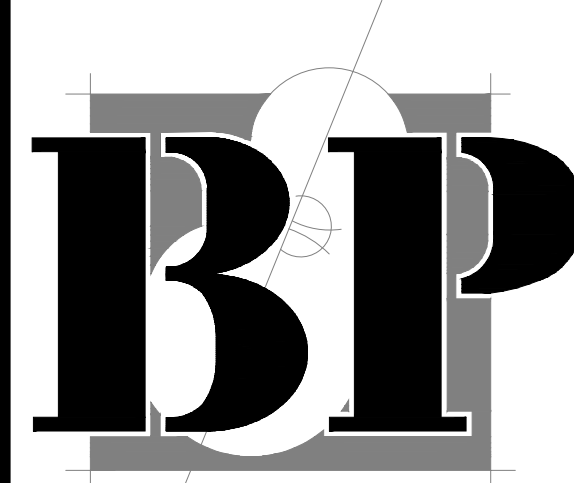
**Revisions**

No. Date:

**Drawing Title:**  
**Wall Sections**

**Drawing No.:**

**A5.0**



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Project Name:

Project Name:

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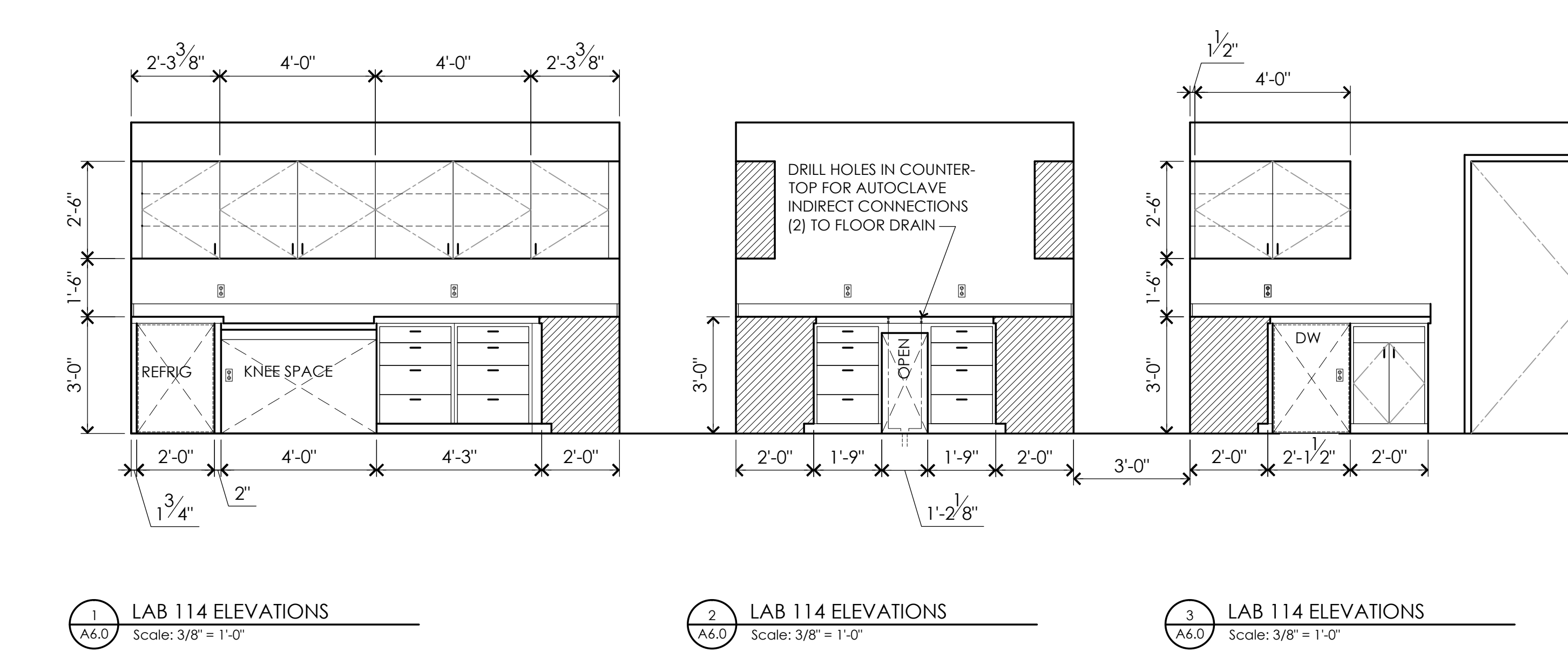
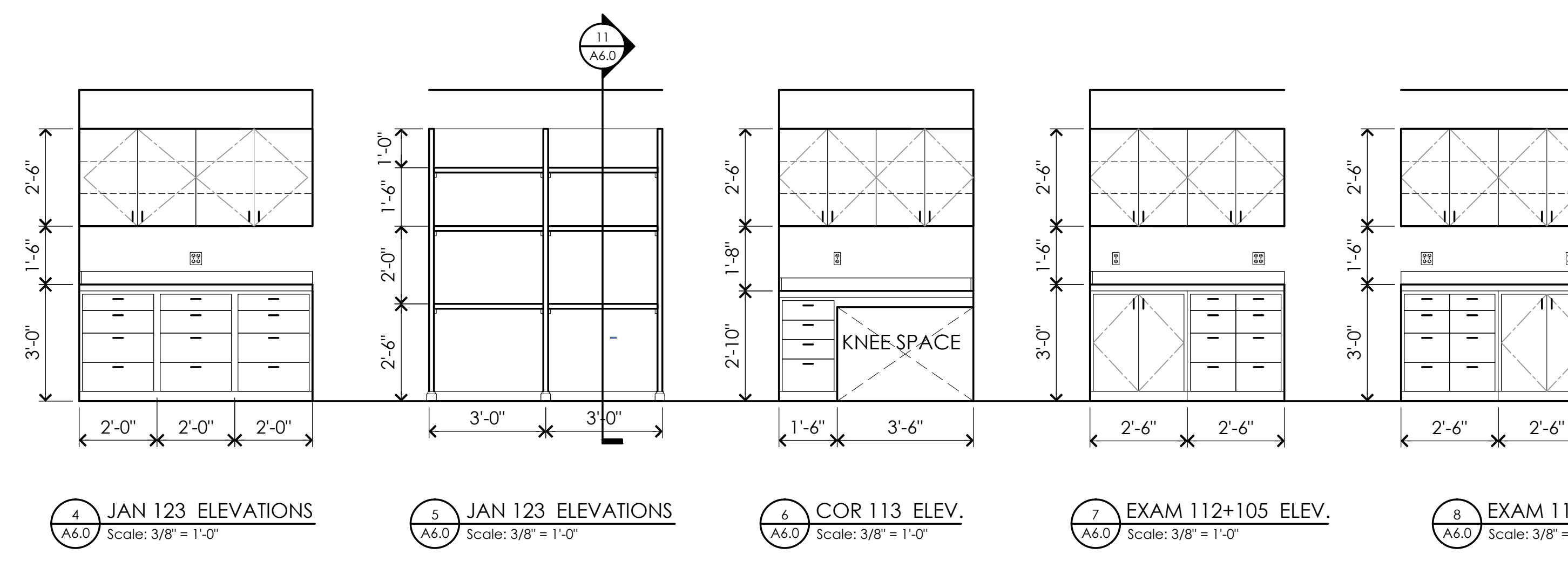
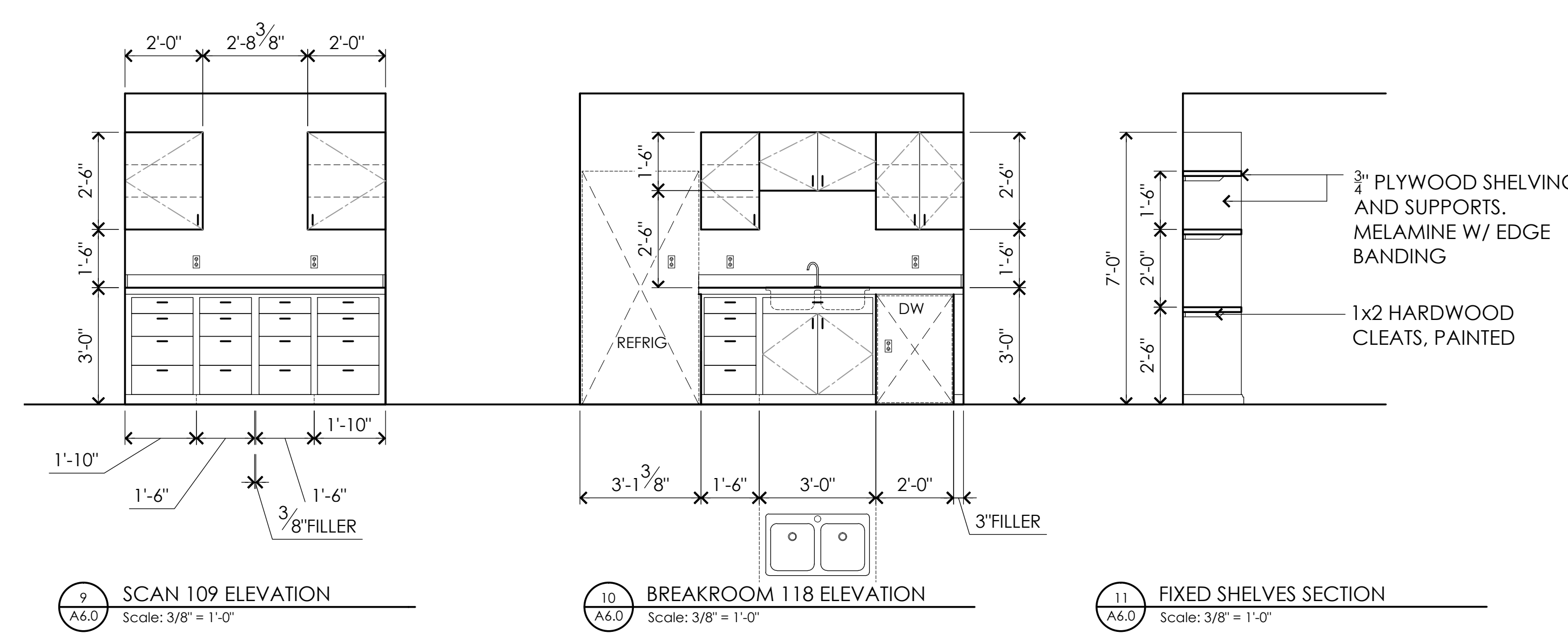
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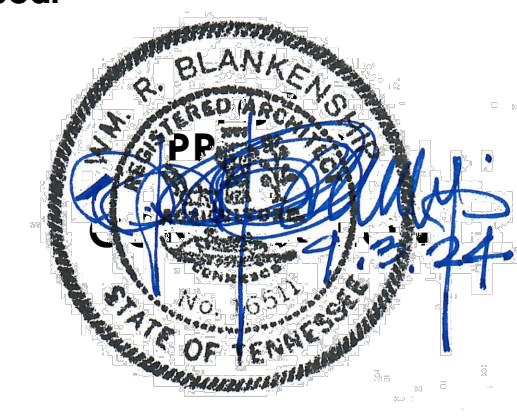
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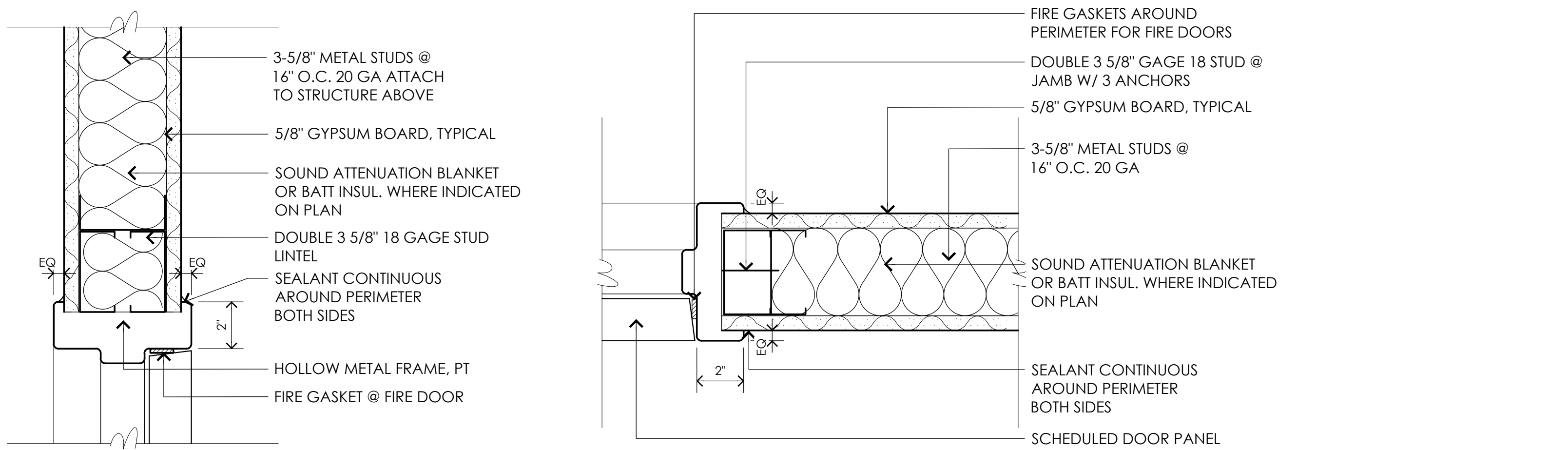
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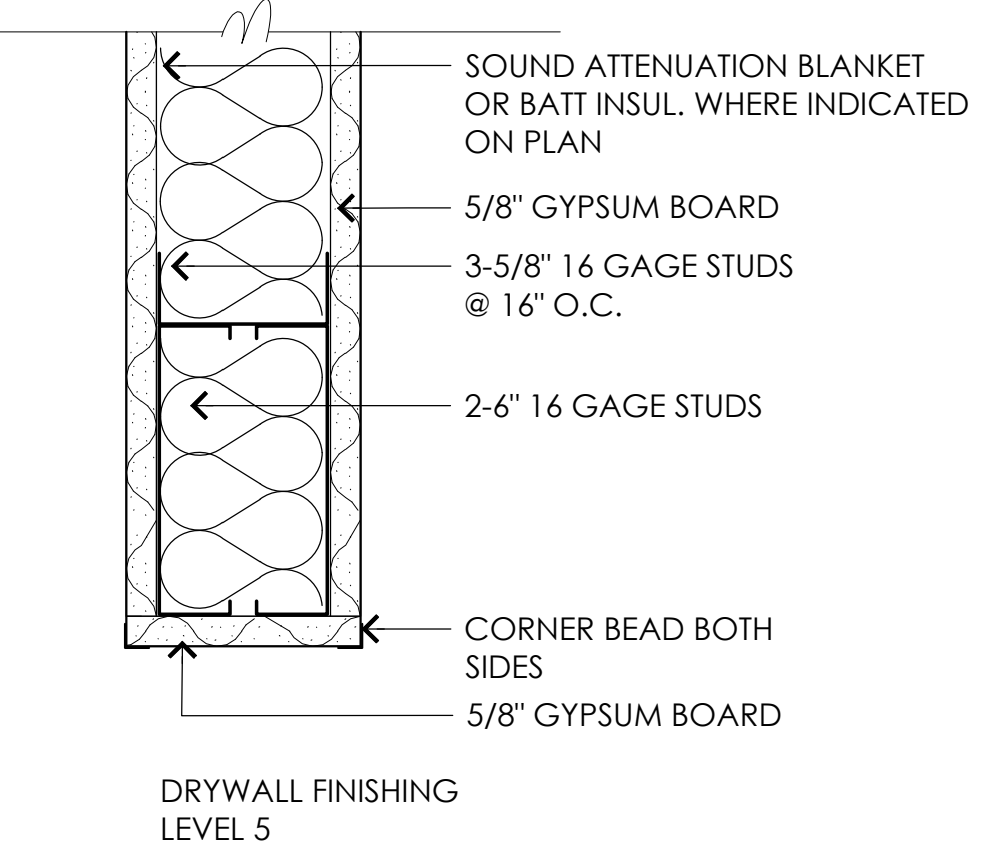
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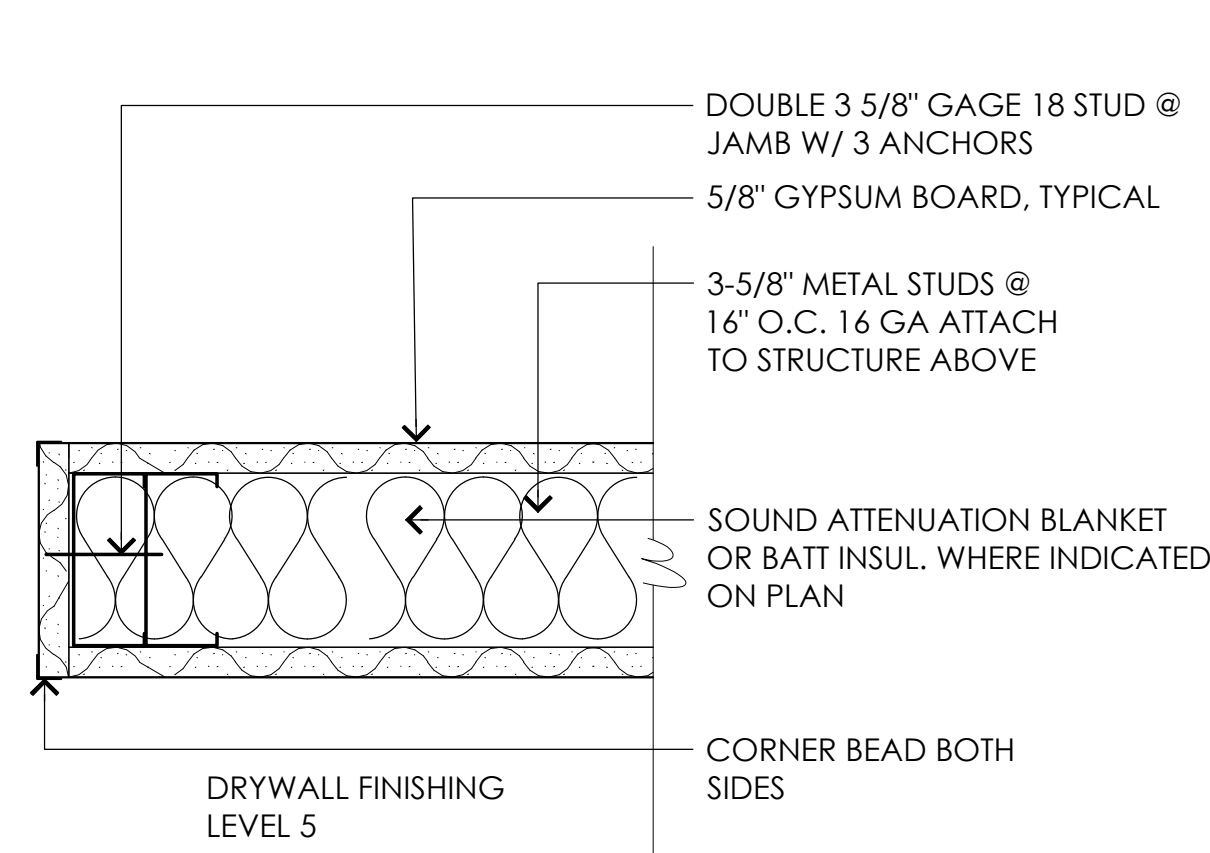


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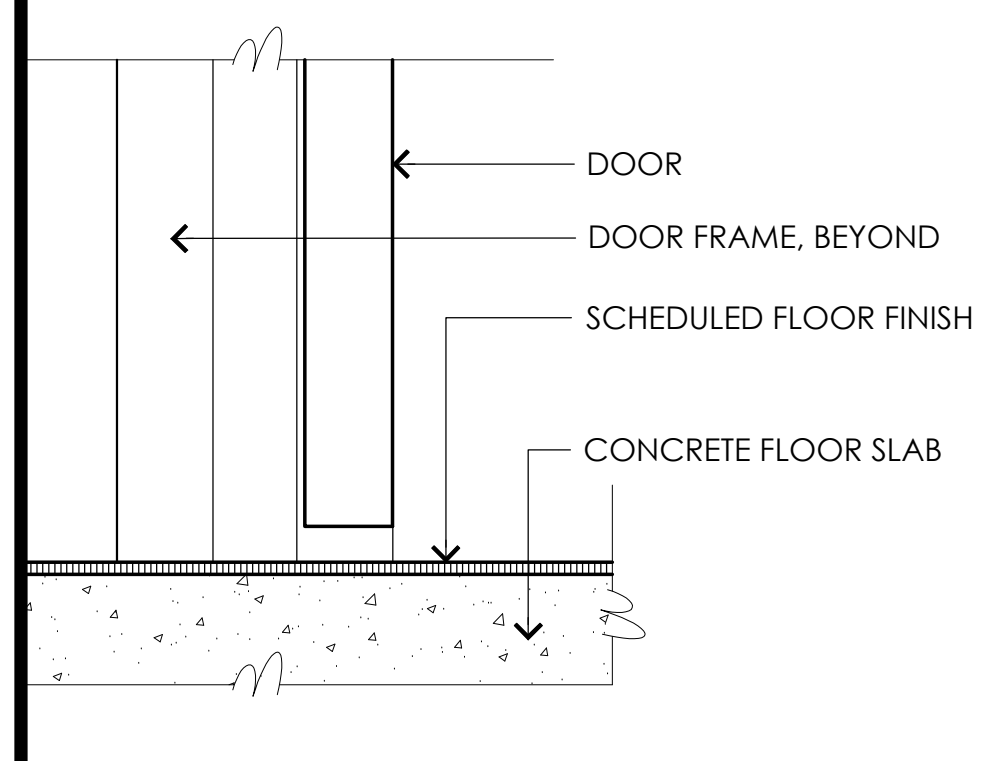
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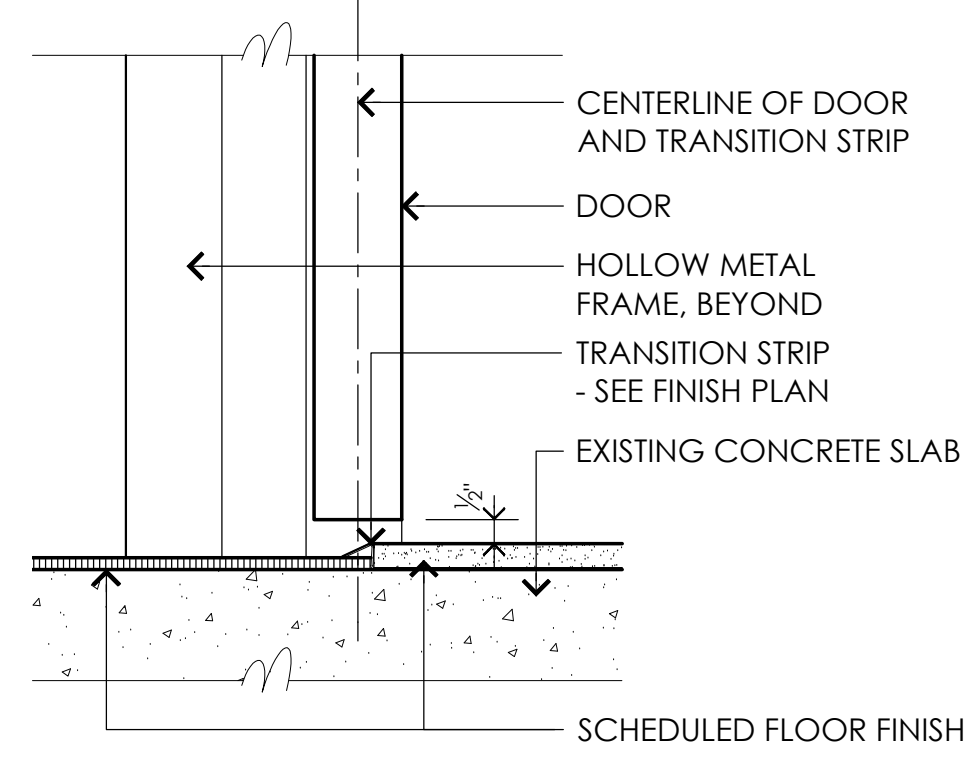
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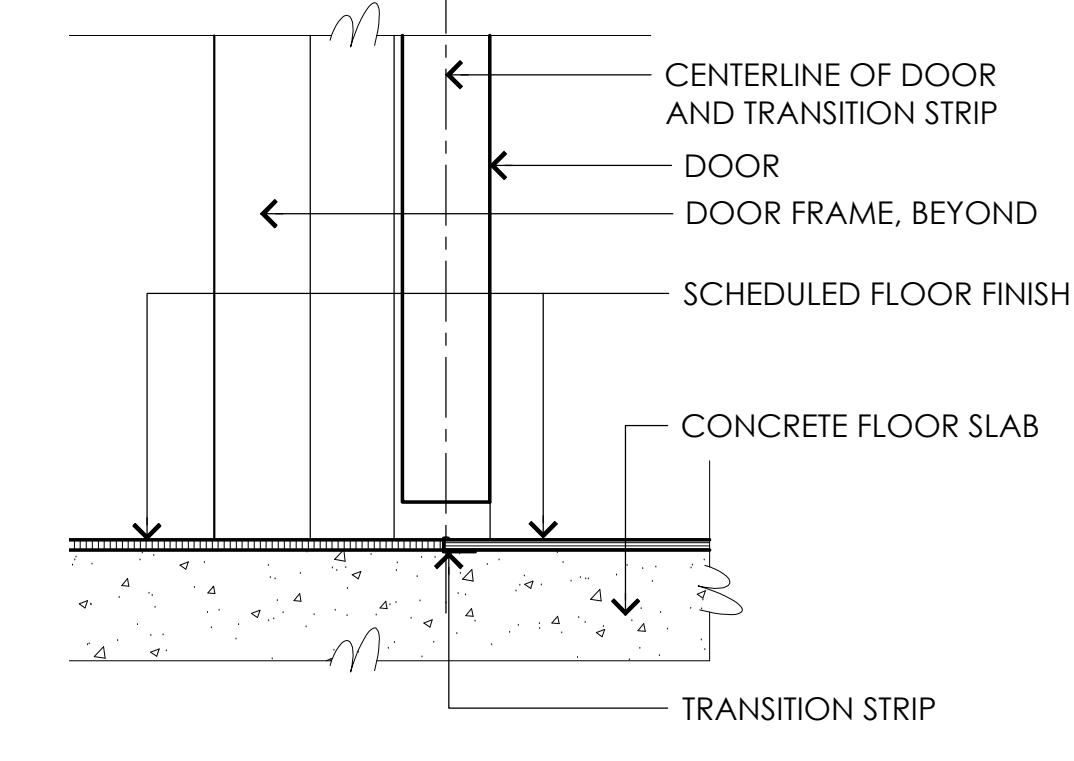
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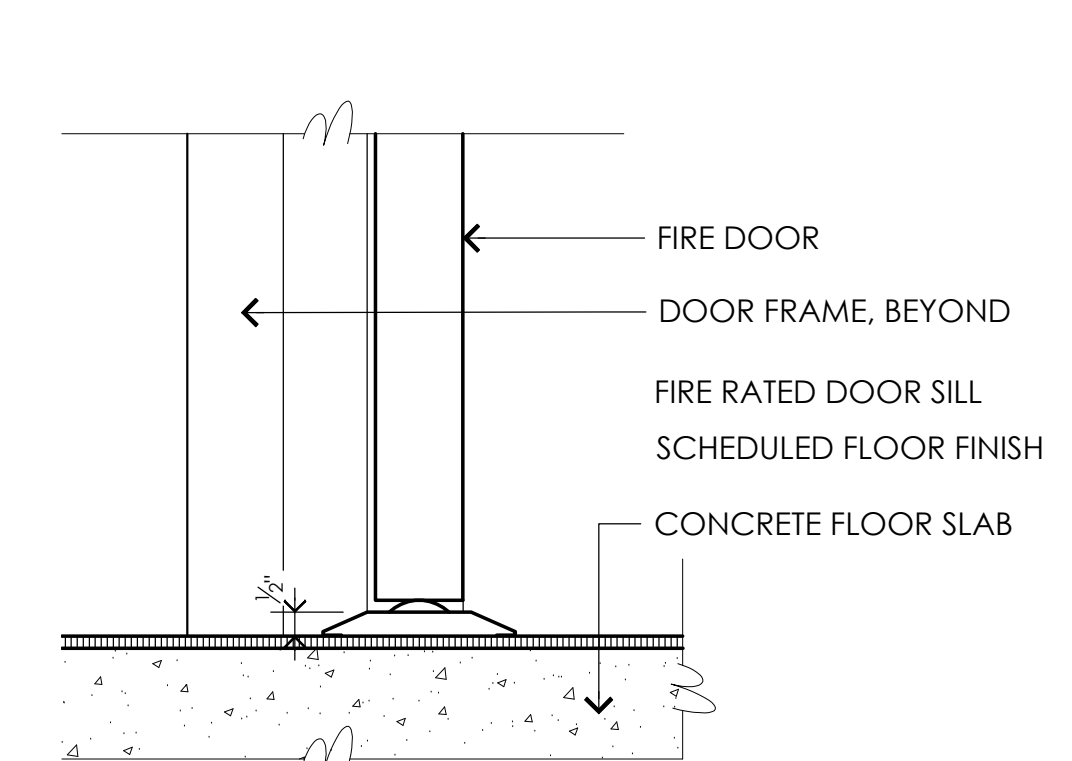
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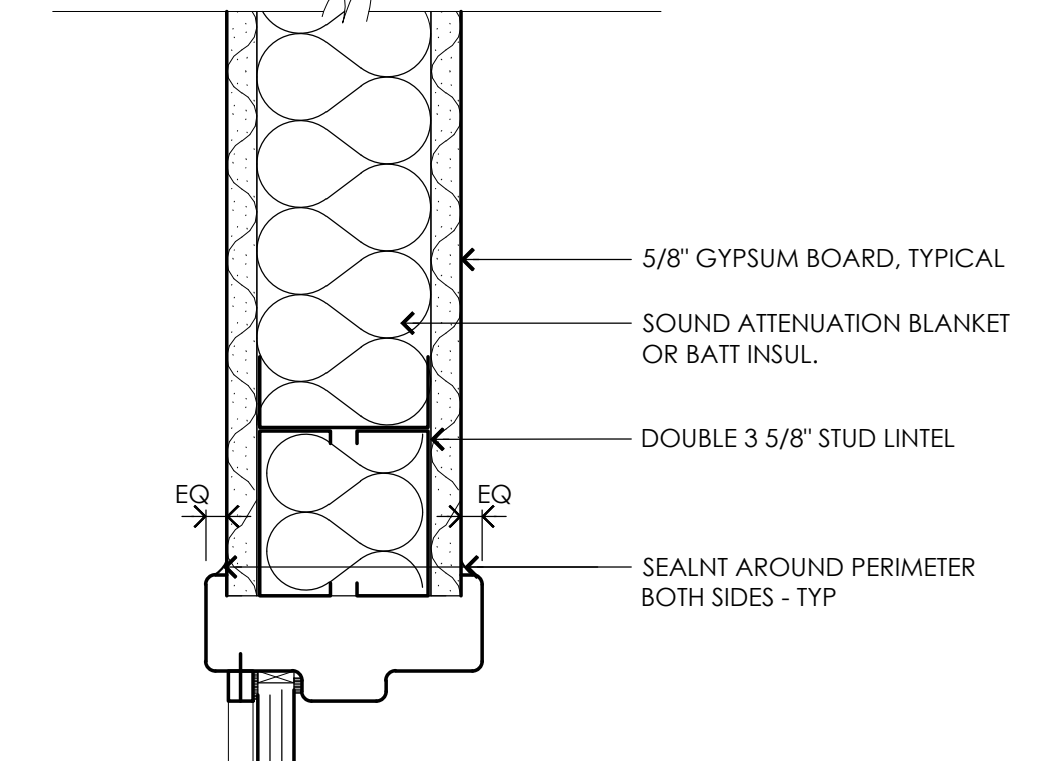
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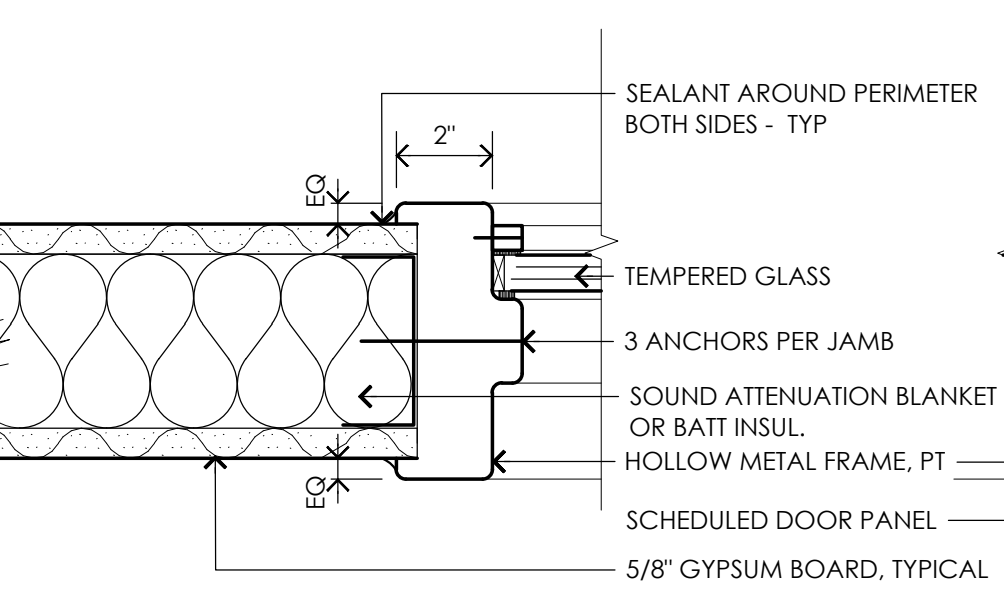
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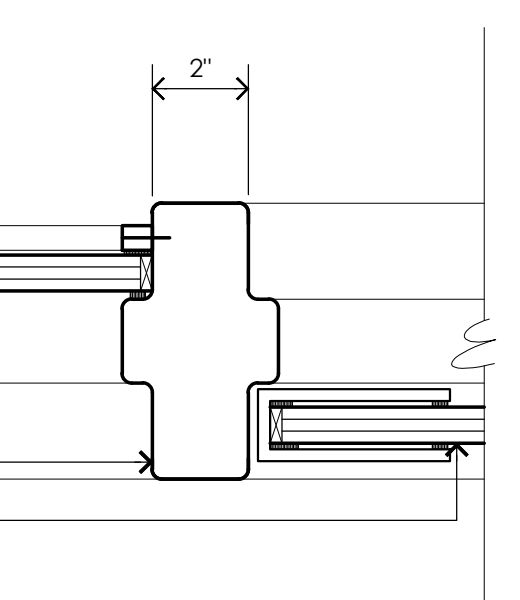
8 SILL DETAIL  
A8.0 Scale: 3" = 1'-0"



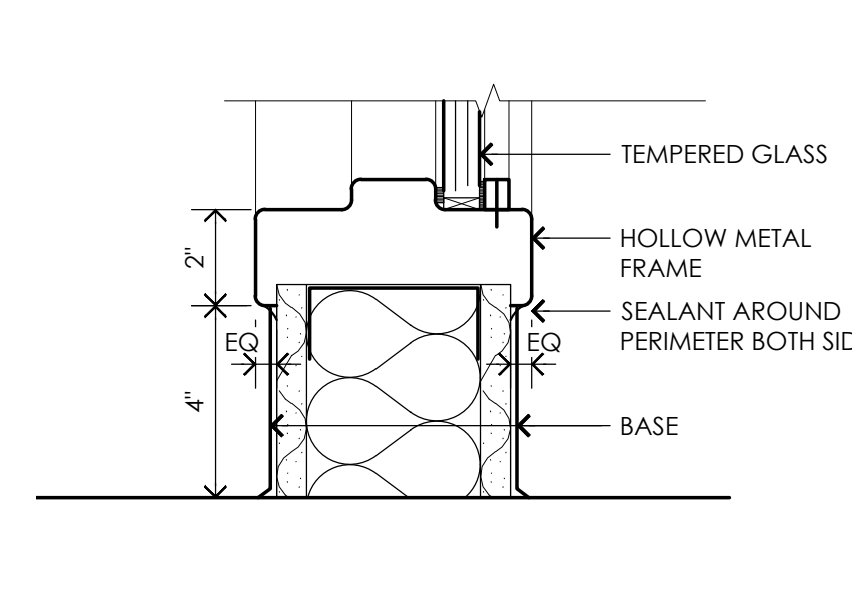
9 HEAD INTERIOR WINDOW DETAIL  
A8.0 Scale: 3" = 1'-0"



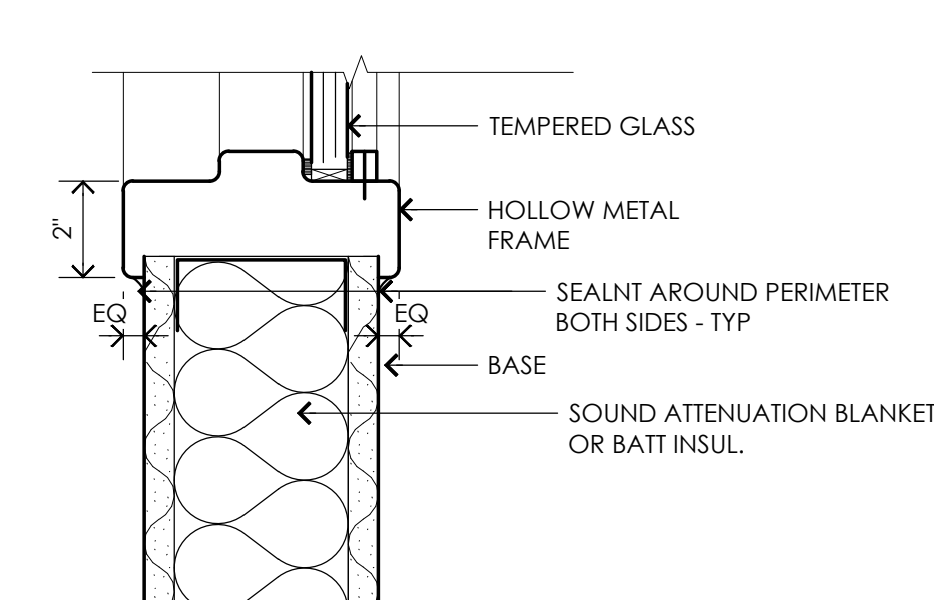
10 JAMB DETAIL  
A8.0 Scale: 3" = 1'-0"



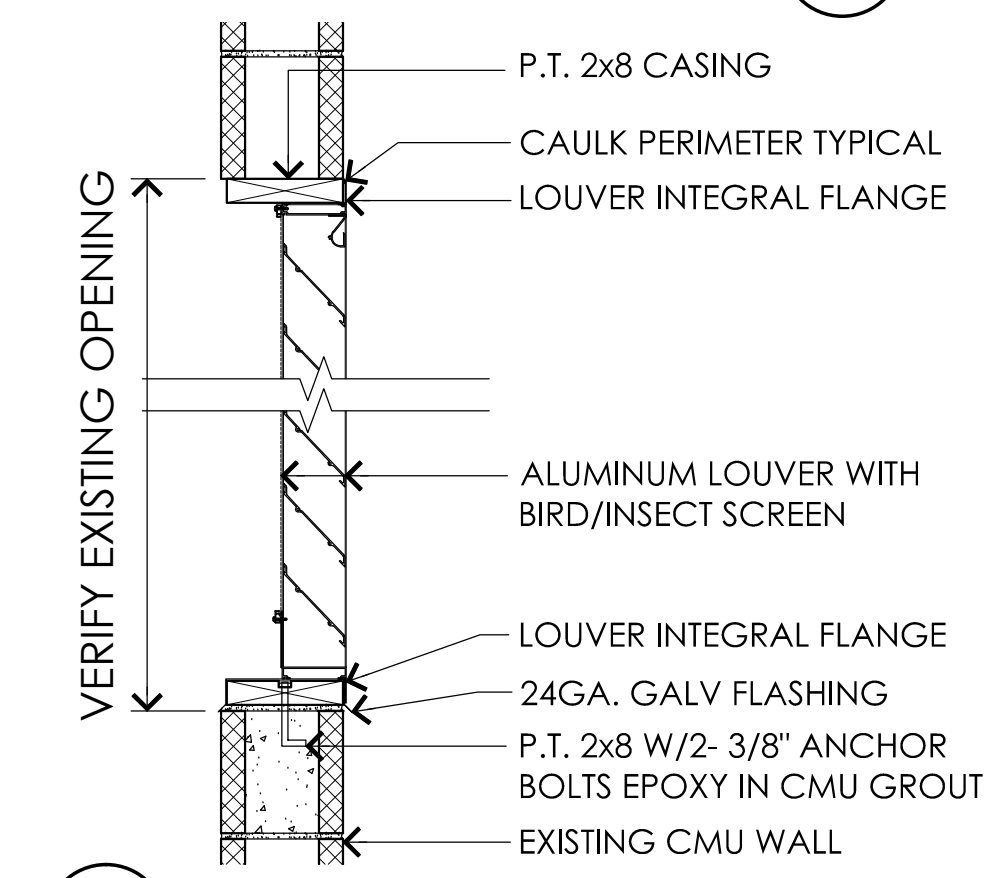
11 MULLION DETAIL  
A8.0 Scale: 3" = 1'-0"



12 SILL DETAIL  
A8.0 Scale: 3" = 1'-0"



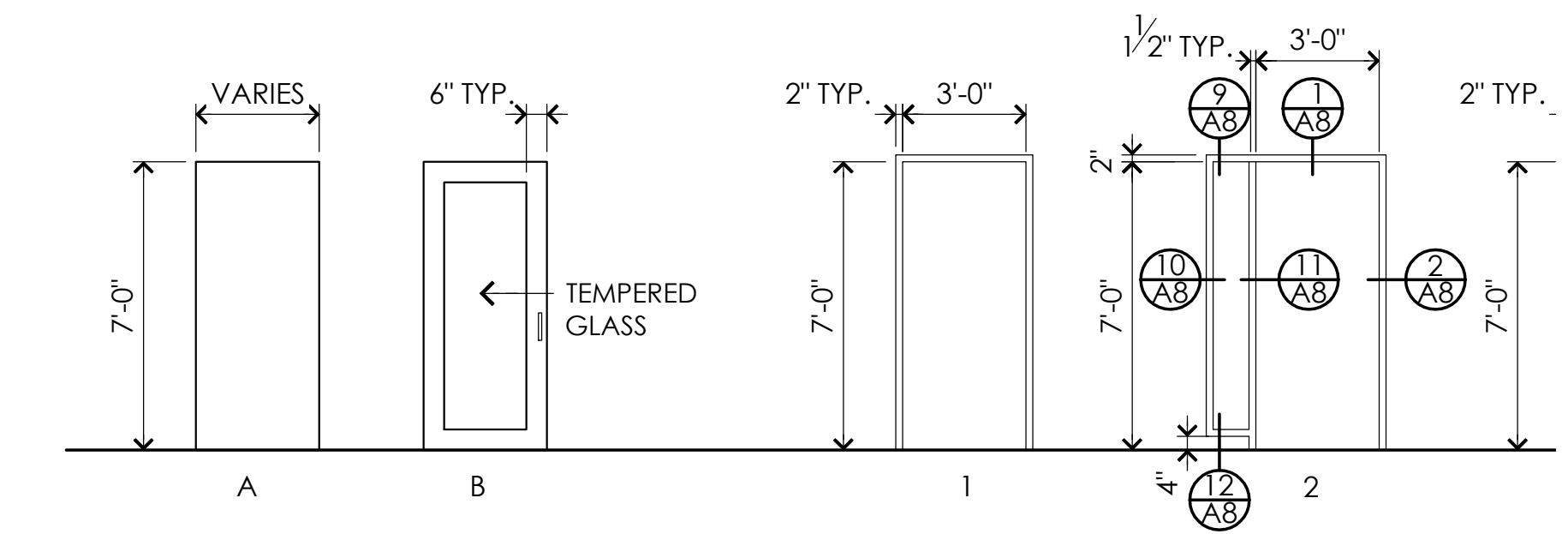
13 SILL DETAIL  
A8.0 Scale: 3" = 1'-0"



14 SECTION  
A8.0 Scale: 1" = 1'-0"

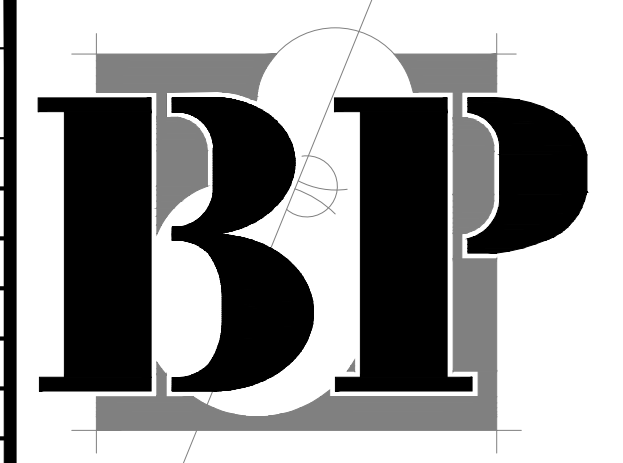
DOOR SCHEDULE												
DOOR NO.	ROOM	DOOR			FRAME				HDW SET	FIRE RATING	REMARKS	
		MATL	TYPE	SIZE	MATL	FRAME ELEV.	HEAD	JAMB				SILL
100*	ENTRY	-	-	EXISTING	-	EXISTING	-	-	-	1	-	CLEAN DOOR & FRAME, RE-KEY
101*	WAITING	WD	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	-	11	-	
102	RECEPTION	WD	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	-	5	-	
103	CHAIRS	WD	A	(2)2'-6" x 7'-0"	HM	3	1/A8.0	2/A8.0	5/A8.0	6	-	DOUBLE DOORS
104	TOILET	WD	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	6/A8.0	7	-	
106	DENTAL EXAM	-	-	3'-6" x 7'-0"	-	-	3/A8.0	5/A8.0	7/A8.0	-	-	CASED OPENING
107*	HALL	-	-	EXISTING	-	EXISTING	-	-	-	2	-	CLEAN DOOR & FRAME, RE-KEY
108	MECH	WD/GYP	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	8/A8.0	4	45 MIN	
109	SCAN	-	-	3'-6" x 7'-0"	-	-	3/A8.0	4/A8.0	7/A8.0	-	-	CASED OPENING
112	DENTAL EXAM	HM	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	7/A8.0	5	-	
114	LAB	HM	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	7/A8.0	8	-	
116	OFFICE	ALUM/GLASS	B	3'-0" x 7'-0"	HM	2	1/A8.0	2/A8.0	5/A8.0	3	-	
117*	HALL	-	-	EXISTING	-	EXISTING	-	-	7/A8.0	-	-	CLEAN DOOR & FRAME, RE-KEY
118	BREAKROOM	HM	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	6/A8.0	5	-	
119	TOILET	WD	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	7/A8.0	7	-	
120	OFFICE	HM	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	7/A8.0	9	-	
121	OFFICE	HM	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	5/A8.0	9	-	
122	SUPPLY	HM	A	2'-8" x 7'-0"	HM	1	1/A8.0	2/A8.0	7/A8.0	10	-	
123	JAN/SUPPLY	HM	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	5/A8.0	10.1	-	
124	SUPPLY	HM	A	3'-0" x 7'-0"	HM	1	1/A8.0	2/A8.0	-	10	-	

\* BADGE OPERATED ELECTRIC LOCK



DOOR & FRAME ELEVATIONS

9/30/2024 2:24:02 PM, 1:1



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Contact Name: Art Miller

Project Name:

# Anderson County Health Dental Office Renovations

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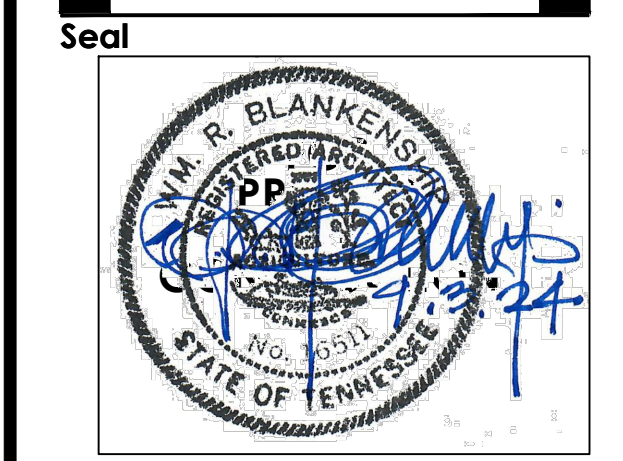
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Date: 9/3/24

Drawn By: BAS + SN

Checked By: BB

Project Number: 21-04.1

Revisions




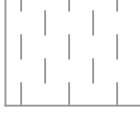
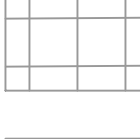
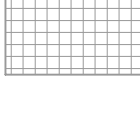
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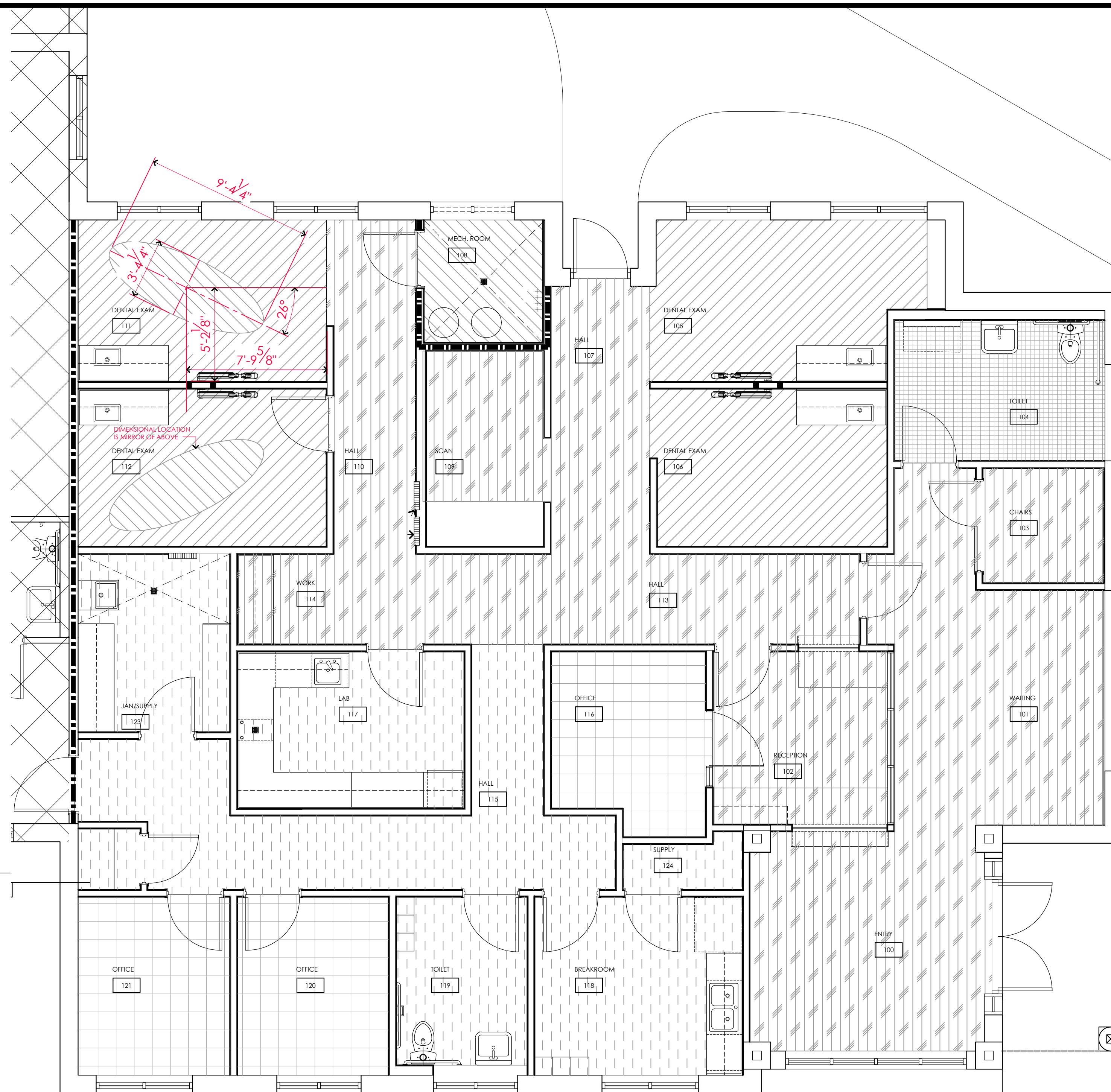
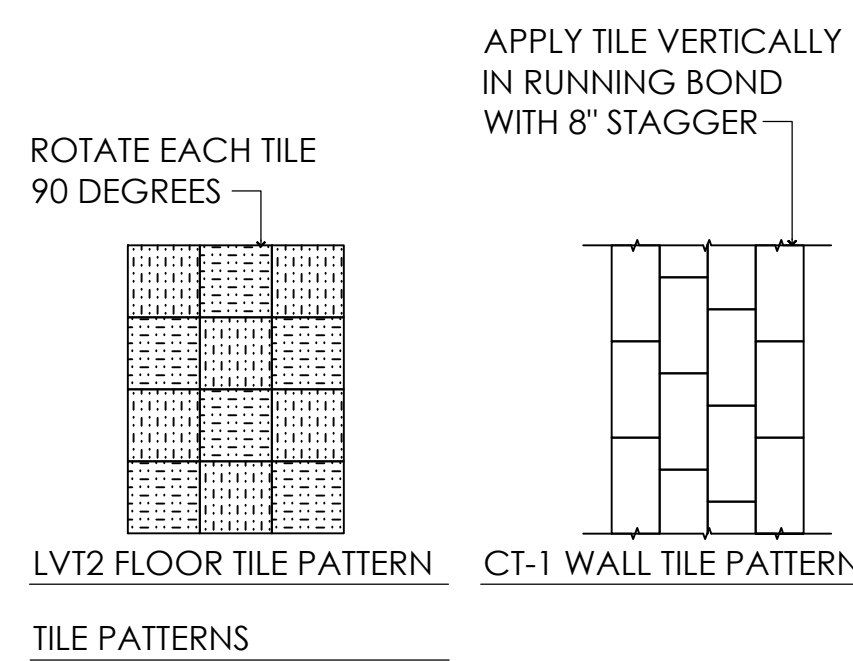
Drawing Title:

Door Schedule & Details

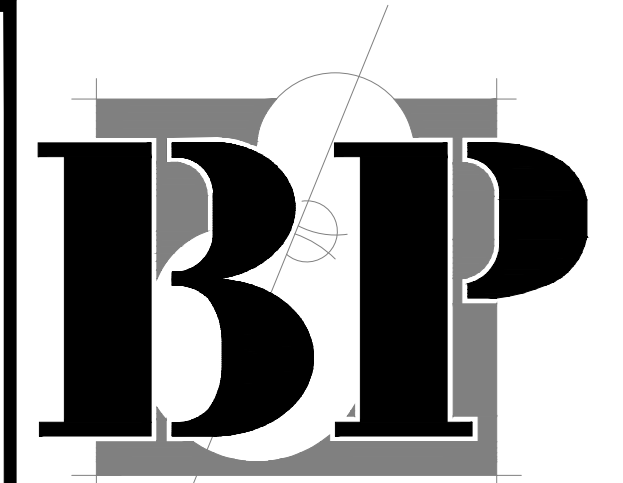
Drawing No.:

# A8.0

LEGEND	
	ARMSTRONG "NATURAL CREATIONS" NA170 SOLANO MAPLE HONEYSUCKLE
	ARMSTRONG "MEDINTONE" GOTU KOLA #H2030
	ARMSTRONG "MEDINTONE" INDIGO MID #H5350
	ARMSTRONG "COALESCE" ATRO CASHMERE #ST896
	CARPET TILE: SHAW "JOURNAL" #ST512 COLOR: REPERTOIRE #75325
	CERAMIC TILE: DAL TILE: WANDERWISE ROAM WW03 MATTE



 FLOOR FINISHES PLAN  
Scale: 1/4" = 1'-0"



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**Project Name:**

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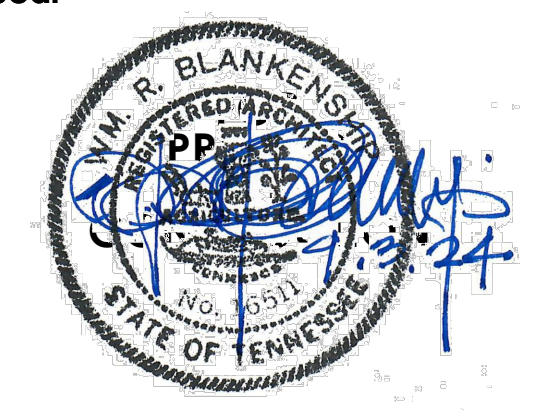
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Checked By: BB

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**Revisions**

No. Date:

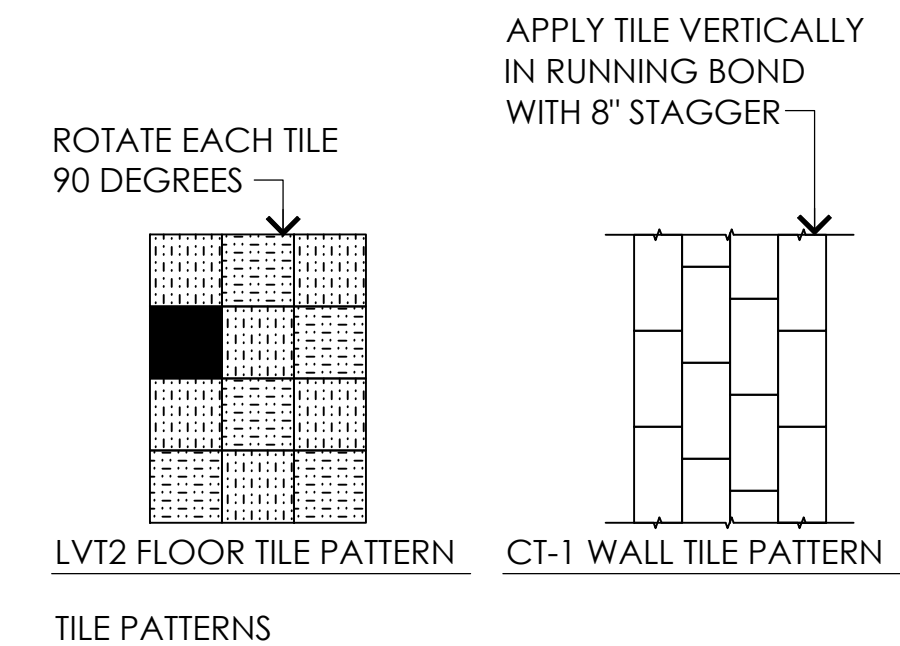
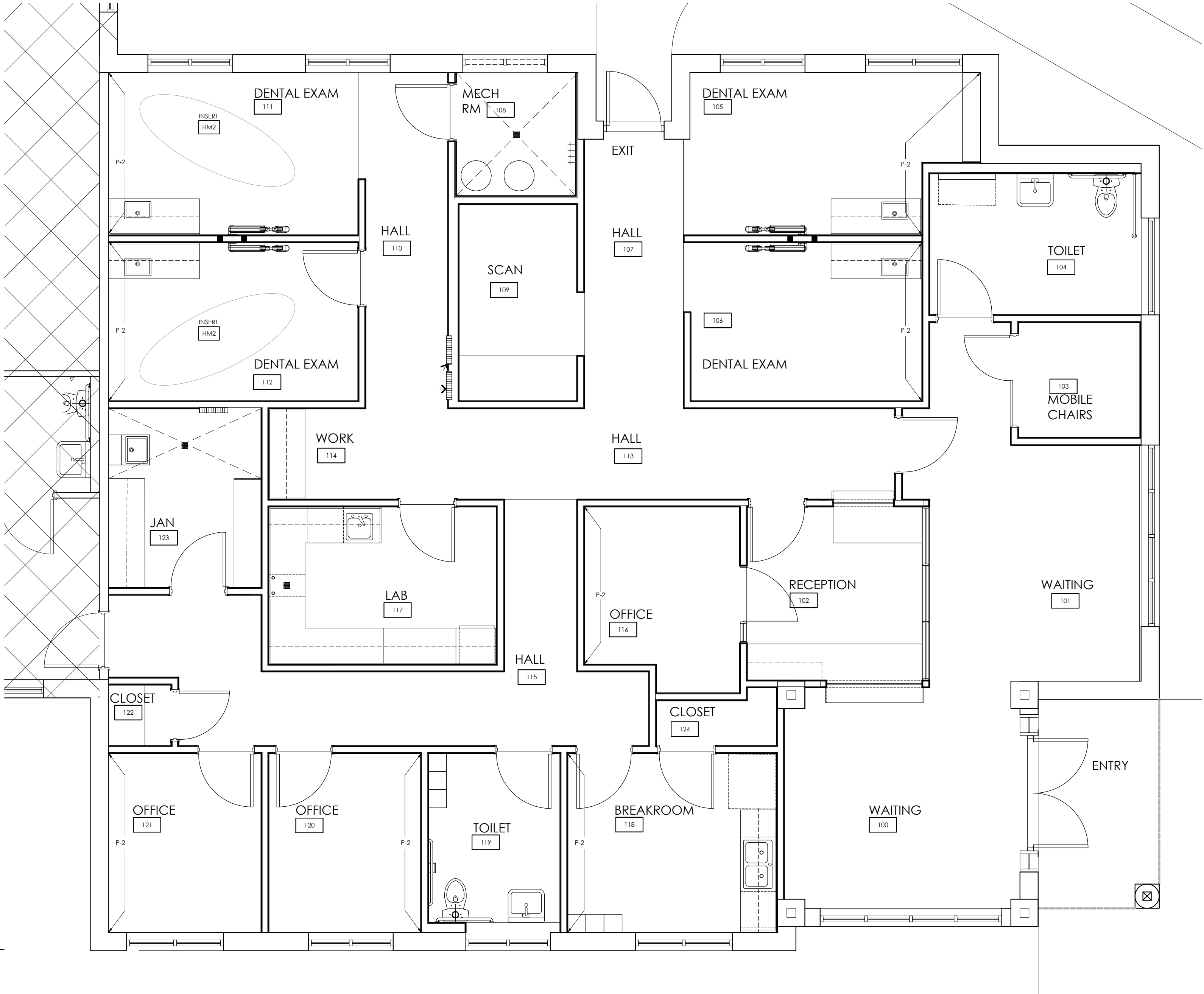
**Drawing Title:**

Floor Finishes Plan

**Drawing No.:**

A9.0

ROOM NO.	NAME	FLOOR FINISH	BASE FINISH	WALL FINISH				CEILING MATERIAL	COMMENTS
				NORTH WALL	SOUTH WALL	EAST WALL	WEST WALL		
100	WAITING	LVT1	RB1	P1+P2	P1+P2	P1+P2	P1+P2	ACT1	REFER SHEET A2.1 FOR SOUND PANELS AND PAINT LOCATIONS
101	WAITING	LVT1	RB1	P1+P2	P1+P2	P1	P1	ACT1	REFER SHEET A2.1 FOR SOUND PANELS AND PAINT LOCATIONS
102	RECEPTION	LVT1	RB1	P1	P1	P1	P1	ACT1	
103	MOBILE CHAIRS	LVT1	RB1	P1	P1	P1	P1	ACT1	
104	TOILET	CT1	CT1+RB1	CT1	P1	P1	CT1	ACT1	APPLY OPAQUE FILM TO WINDOW REFER TO WALL TILE PATTERN DIAGRAM
105	DENTAL EXAM	HM1	RB1	P2	P1	P1	P2	ACT1	
106	DENTAL EXAM	HM1	RB1	P2	P1	P1	P2	ACT1	
107	HALL	LVT2	RB1	P2	P1	-	P1	ACT1	REFER TO LVT1 TILE PATTERN DIAGRAM
108	MECHANICAL RM	HM2	RB1	P1	P1	P1	P1	GYP	GYP. BD. CEILING PAINT - WHITE SATIN
109	PANORAMIC	LVT1	RB1	P2	P1	P1	P1	ACT1	
110	HALL	LVT1	RB1	P1	P1	-	P1	ACT1	
111	DENTAL EXAM	HM1+2	RB1	P1	P2	P1	P1	ACT1	
112	DENTAL EXAM	HM1+2	RB1	P1	P2	P1	P1	ACT1	
113	HALL	LVT1	RB1	P1	-	P1	P1	ACT1	
114	WORK STATION	LVT1	RB1	-	P1	P1	P1	ACT1	
115	HALL	LVT2	RB1	P1	P1	P1	-	ACT1	REFER TO LVT1 TILE PATTERN DIAGRAM
116	OFFICE	CPT1	RB1	P1	P1	P1	P2	ACT1	
117	LABORATORY	LVT2	RB1	P1	P1	P1	P1	ACT1	REFER TO LVT1 TILE PATTERN DIAGRAM
118	BREAKROOM	LVT2	RB1	P1	P2	P1	P1	ACT1	REFER TO LVT1 TILE PATTERN DIAGRAM
119	TOILET	LVT2	RB1	P1	P1	P1	P1	ACT1	REFER TO LVT1 TILE PATTERN DIAGRAM
120	OFFICE	CPT1	RB1	P2	P1	P1	P2	ACT1	
121	OFFICE	CPT1	RB1	P1	P2	P1	P2	ACT1	
122	CLOSET	LVT2	RB1	P1	P1	P1	P1	GYP	REFER TO LVT1 TILE PATTERN DIAGRAM
123	JANITOR	LVT2	RB1	P1	P1	P1	P1	ACT1	REFER TO LVT1 TILE PATTERN DIAGRAM
124	CLOSET	LVT2	RB1	P1	P1	P1	P1	ACT1	REFER TO LVT1 TILE PATTERN DIAGRAM



**FLOOR FINISH PLAN**  
Scale: 1/8" = 1'-0"

**INTERIOR GENERAL NOTES**

1. INSTALL FLOOR DATA AND POWER OUTLETS BOXES & COVERS LEVEL WITH FINISH FLOORING.
2. PAINT HOLLOW METAL DOOR FRAMES WITH SEMI-GLOSS.
3. PROVIDE LEVEL 5 FINISH TO GYPSUM WALL BOARD PAINT IN EGG-SHELL FINISH.
4. SUBMIT SAMPLES TO ARCHITECT FOR REVIEW AND APPROVAL PRIOR TO CONSTRUCTION.



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**Project Name:**

**Anderson County Health Dental Office Renovations**

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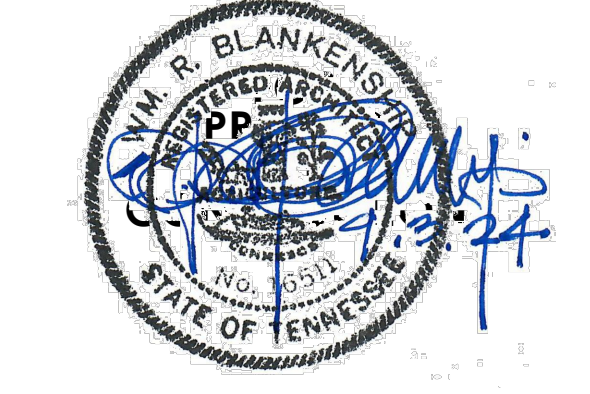
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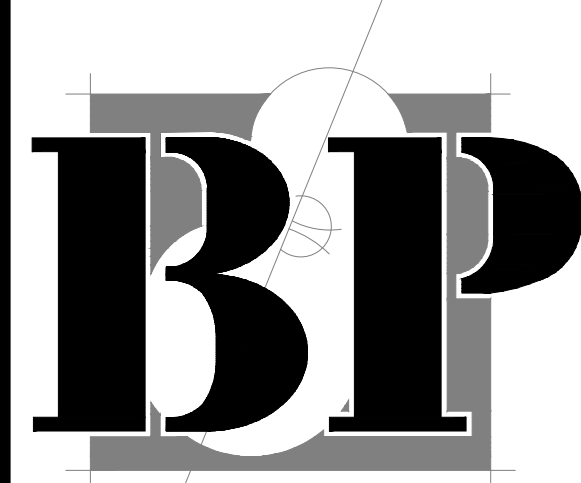
**Finish Plan & Schedule**

**Drawing No.:**

**A9.1**

**GENERAL NOTES**

- REFER TO ATTACHED DENTAL EQUIPMENT PLANS FOR EQUIPMENT SCHEDULE, POWER REQUIREMENTS, PLUMBING REQUIREMENTS, AIR REQUIREMENTS, LOCATIONS AND CLEARANCES. SHEETS 1-7



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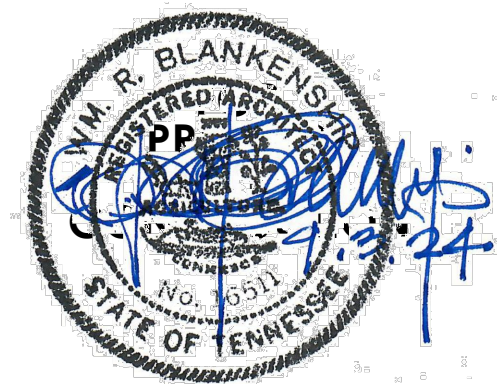
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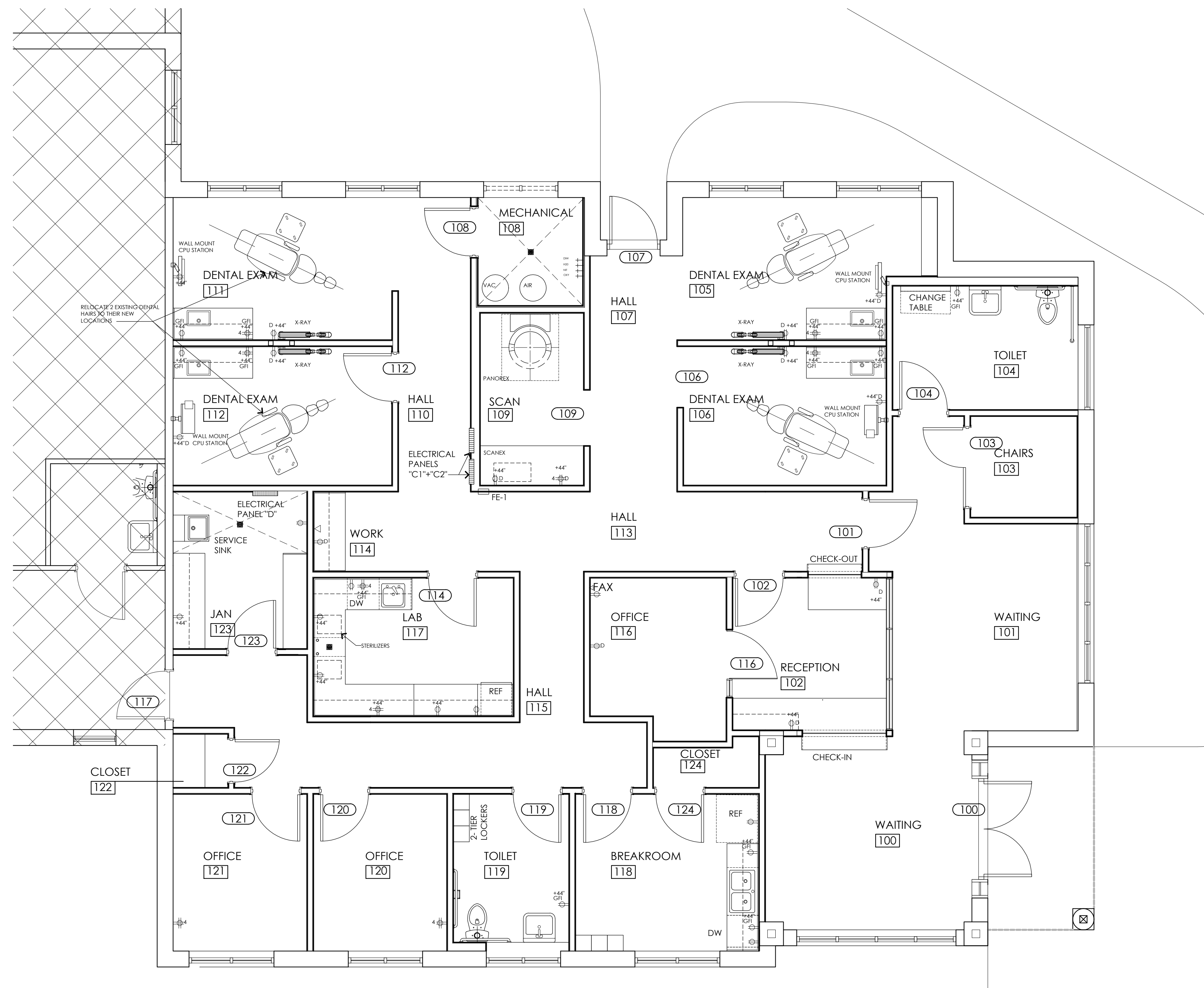
No. Date:

**Drawing Title:**

**Equipment Plan**

**Drawing No.:**

**A10.0**



**EQUIPMENT PLAN**  
A10.0 Scale: 1/4" = 1'-0"