

Bryant City Development Review Committee

Thursday, January 5th, 2017

9:00 a.m.

Bryant City Complex/Administration Conference Room

AGENDA

Jiffy Lube Sign Permit

Sign Studio LLC - Requesting Multiple Sign Permit Approval

Documents:

[Jiffy Lube Bryant AR- Sign Permit.pdf](#)

Fleming Electric

Josh Ruple - Submitting Revisions and Requesting Site Plan Approval

Documents:

[~Combined 12-29-2016~.pdf](#)

Dr. Fulks Dentistry

Requesting Site Plan Approval

Documents:

[Dr Fulks Dentistry Application.pdf](#)
[Architectural Site Plan.pdf](#)
[Civil Plans.pdf](#)
[Electrical Site Plan.pdf](#)
[Equipment Plan.pdf](#)
[Mechanical Plans.pdf](#)
[Plumbing Plans.pdf](#)
[Structural Plans.pdf](#)

Ultimate Express Carwash

Mark McCaslin - Requesting Site Plan Approval

Documents:

[Final layout of site Mark Maccaslin 121616.pdf](#)

Permit Report

Greg Huggs

Cabinet
Remove (2)
Install 1
Sign # 1

City of Bryant, Arkansas
Code Enforcement, Permits and Inspections
312 Roya Lane
Bryant, Ar 72022
501-943-0943

SIGN PERMIT APPLICATION

Applicants are advised to read the sign ordinance prior to completing and signing this form. The Sign Ordinance is available at www.cityofbryant.com

Site plan showing placement of sign and any existing signs on the property. A rendering of sign showing correct dimensions of all signs are **required** with application. Additional documentation may be required by Sign Administrator.

Date: 12/14/16

Note: Electrical permits may be Required, Please contact the Permits Office at 501-943-0943 for more information.

SIGN CO. OR
SIGN OWNER

Name Sign Studio LLC
Address 1861 N Main Street
City, State, Zip Cave Springs AR
Phone (479) 685-9501
Alternate Phone (479) 871-4080

PROPERTY OWNER

Name Mark McCaslin
Address 1900 N Reynolds Rd
City, State, Zip Bryant AR 72022
Phone _____
Alternate Phone _____

GENERAL DETAILS

Name of Business Jiffy Lube
Address/Location of sign 1900 N Reynolds Rd
Sign dimensions (height, length, width) 48" X 96 1/2"
Zoning Classification _____

SIGN TYPE

Pole Monument
 Wall
 Other (type) Repl Cabinet
Total sq. ft. 32 sq ft
Aggregate Surface Area (total all signs) 32 sq ft

Height of sign from lot surface: Bottom _____ Top _____

READ CAREFULLY BEFORE SIGNING

I, Felita M Johnson, do hereby certify that all information contained within this application is true and correct. I fully understand that the terms of the Sign Ordinance supersede the Sign Administrator's approval and that all signs must fully comply with all terms of the Sign Ordinance regardless of approval. I further certify that the proposed sign is authorized by the owner of the property and that I am authorized by the property owner to make this application. I understand that no sign may be placed in any public right of way. I understand that I must comply with all Building and Electrical Codes and that it is my responsibility to obtain all necessary permits.

Felita M Johnson 12-14-16
Applicant's Signature Date Sign Administrator(or Designee) Approval Date

Sign # 2
Fascia Sign

City of Bryant, Arkansas
Code Enforcement, Permits and Inspections
312 Roya Lane
Bryant, Ar 72022
501-943-0943

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Date: 12/14/14

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SIGN CO. OR
SIGN OWNER

Name Sign Studio LLC
Address 1861 N Main Street
City, State, Zip Cave Springs AR
Phone (479) 685-9501
Alternate Phone (479) 871-4080

PROPERTY OWNER

Name Mark McCaslin
Address 1900 N Reynolds Rd
City, State, Zip Bryant AR 72022
Phone _____
Alternate Phone _____

GENERAL DETAILS

Name of Business Jiffy Lube
Address/Location of sign 1900 N Reynolds Rd
Sign dimensions (height, length, width) 32" x 13'-0" Copy
1'-6" x 2'-4"

SIGN TYPE

Pole Monument
 Wall
 Other (type) _____

Total sq. ft. 35.41 sq ft Jiffy Lube
3.5 sq ft multi-care
38.91 sq ft Pennzoil
Sign

Zoning Classification _____ Aggregate Surface Area (total all signs) _____
Height of sign from lot surface: Bottom _____ Top _____

READ CAREFULLY BEFORE SIGNING

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Felita M Johnson 12-14-14
Applicant's Signature Date Sign Administrator(or Designee) Approval Date

City of Bryant, Arkansas
Code Enforcement, Permits and Inspections
312 Roya Lane
Bryant, Ar 72022
501-943-0943

Directional
Wall Signs
Qty (3)
Sign #3

SIGN PERMIT APPLICATION

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Date: 12/14/16

Note: Electrical permits may be Required, Please contact the Permits Office at 501-943-0943 for more information.

SIGN CO. OR
SIGN OWNER

Name Sign Studio LLC
Address 1861 N Main Street
City, State, Zip Cave Springs AR
Phone (479) 685-9501
Alternate Phone (479) 871-4080

PROPERTY OWNER

Name Marie McCaslin
Address 1900 N Reynolds Rd
City, State, Zip Bryant AR 72022
Phone _____
Alternate Phone _____

GENERAL DETAILS

Name of Business Jiffy Lube
Address/Location of sign 1900 N Reynolds Rd
Sign dimensions (height, length, width) 52 1/2" x 21"

SIGN TYPE

Pole Monument
 Wall
 Other (type) Directional (3)
Total sq. ft. 7.65

Zoning Classification _____ Aggregate Surface Area (total all signs) 22.95 sq ft

Height of sign from lot surface: Bottom _____ Top _____

READ CAREFULLY BEFORE SIGNING

I, Felita M Johnson, do hereby certify that all information contained within this application is true and correct. I fully understand that the terms of the Sign Ordinance supersede the Sign Administrator's approval and that all signs must fully comply with all terms of the Sign Ordinance regardless of approval. I further certify that the proposed sign is authorized by the owner of the property and that I am authorized by the property owner to make this application. I understand that no sign may be placed in any public right of way. I understand that I must comply with all Building and Electrical Codes and that it is my responsibility to obtain all necessary permits.

Felita M Johnson 12-14-16
Applicant's Signature Date Sign Administrator(or Designee) Approval Date

Sign #4
Welcome

City of Bryant, Arkansas
Code Enforcement, Permits and Inspections
312 Roya Lane
Bryant, Ar 72022
501-943-0943

SIGN PERMIT APPLICATION

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Date: 12/14/16

Note: Electrical permits may be Required, Please contact the Permits Office at 501-943-0943 for more information.

SIGN CO. OR
SIGN OWNER
Name Sign Studio LLC
Address 1861 N Main Street
City, State, Zip Cave Springs AR
Phone (479) 685-9501
Alternate Phone (479) 871-4080

PROPERTY OWNER
Name Mark McCaslin
Address 1900 N Reynolds Rd
City, State, Zip Bryant AR 72022
Phone _____
Alternate Phone _____

GENERAL DETAILS
Name of Business Jiffy Lube
Address/Location of sign 1900 N Reynolds Rd
Sign dimensions (height, length, width) 36 1/2" X 21"

SIGN TYPE
 Pole Monument
 Wall
 Other (type) Direction
Total sq. ft. _____

Zoning Classification _____ Aggregate Surface Area (total all signs) 5.32 sq ft

Height of sign from lot surface: Bottom _____ Top _____

READ CAREFULLY BEFORE SIGNING

I Felita M Johnson, do hereby certify that all information contained within this application is true and correct. I fully understand that the terms of the Sign Ordinance supersede the Sign Administrator's approval and that all signs must fully comply with all terms of the Sign Ordinance regardless of approval. I further certify that the proposed sign is authorized by the owner of the property and that I am authorized by the property owner to make this application. I understand that no sign may be placed in any public right of way. I understand that I must comply with all Building and Electrical Codes and that it is my responsibility to obtain all necessary permits.

Felita M Johnson
Applicant's Signature

12-14-16
Date

Sign Administrator(or Designee) Approval Date

Sign #6
Traffic
Control

City of Bryant, Arkansas
Code Enforcement, Permits and Inspections
312 Roya Lane
Bryant, Ar 72022
501-943-0943

SIGN PERMIT APPLICATION

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Date: 12/14/16

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SIGN OWNER

Name Sign Studio LLC
Address 1861 N Main Street
City, State, Zip Cave Springs AR
Phone (479) 685-9501
Alternate Phone (479) 871-4080

PROPERTY OWNER

Name Mark McCaslin
Address 1900 N Reynolds Rd
City, State, Zip Bryant AR 72022
Phone _____
Alternate Phone _____

GENERAL DETAILS

Name of Business Jiffy Lube
Address/Location of sign 1900 N Reynolds Rd
Sign dimensions (height, length, width) 28 1/2" X 21"

SIGN TYPE

Pole Monument
 Wall
 Other (type) Traffic Control
Total sq. ft. _____

Zoning Classification _____ Aggregate Surface Area (total all signs) 4.15 X 2 = 8.31

Height of sign from lot surface: Bottom _____ Top _____

READ CAREFULLY BEFORE SIGNING

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Felita M Johnson
Applicant's Signature

12-14-16 _____
Date Sign Administrator(or Designee) Approval Date

Sign #6 Exit 8.31 sg ft
 Total All Signs :
 107.49 sg ft

Sign #1 - 32 sg ft Cabinet (pole sign)
 Sign #2 - 38.91 sg ft - Fascia
 Sign #3 - 22.95 sg ft - Traffic Control Signs (3)
 Sign #4 - 5.32 sg ft - welcome
 Sign #5 - 0000 Viny 1



- Mid block site
- Building faces primary street
- Rear loaded

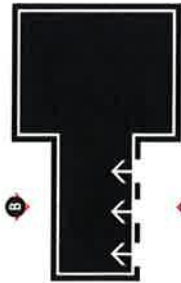
| Item # | Rev | Date | Rev Description | Rev | Rev | Rev | Rev | Rev | Rev | Rev |
|--------|-----|----------|-----------------|-----|-----|-----|-----|-----|-----|-----|
| 0270 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0271 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0272 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0273 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0274 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0275 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0276 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0277 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0278 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0279 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 0280 | 01 | 11/21/15 | Final | 1 | 1 | 1 | 1 | 1 | 1 | 1 |



Location #: 1900

PRIMARY ID

SITE PLAN



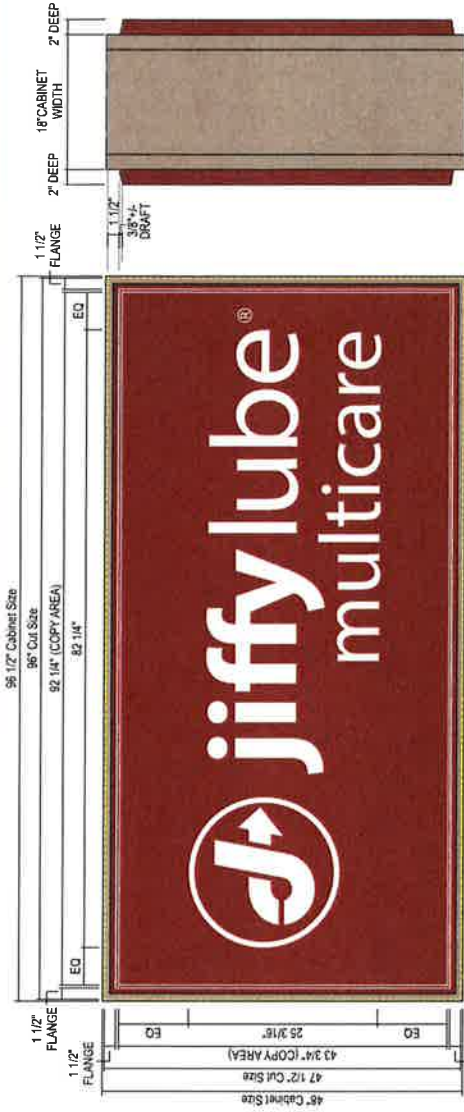
Setback
1 T.B.D.

- Mid block site
- Building faces primary street
- Rear loaded

EXISTING



RECOMMENDATION



SIGN 1

CUSTOM REPLACEMENT CABINET w/ PAN-FORMED FACES

QTY: 1 SCALE: 3/4"=1'-0"

NOTE: REMOVE EXISTING PENNZOIL & QUAKER STATE CABINETS

- INSTALL NEW CABINET w/ HANGER BAR AS SHOWN

FACE DETAIL SIDE VIEW

PROPOSED



Drawing provided by:



SIGN 1

Location:
1900 N Reynolds Road
Bryant, AR 72022
File Path:
Active\ACCOUNTS\Jiffy\Asset\Project_3128\Location\3128_1900_Bryant_AR_R2



Drawing created by:

| Rev # | Rev Desc | Date | Drawn By | Checked By | Revision Description | Rev # | Rev Desc | Date | Drawn By | Checked By | Revision Description |
|-------|------------|------------|----------|------------|----------------------|-------|------------|------------|----------|------------|----------------------|
| Rev 1 | 10/26/2010 | 11/22/2010 | JF | JF | Revised per client | Rev 1 | 10/26/2010 | 11/22/2010 | JF | JF | Revised per client |
| Rev 2 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client | Rev 2 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client |
| Rev 3 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client | Rev 3 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client |
| Rev 4 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client | Rev 4 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client |
| Rev 5 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client | Rev 5 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client |
| Rev 6 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client | Rev 6 | 10/26/2010 | 10/26/2010 | JF | JF | Revised per client |



Location #: 1900

ELEVATION A

SITE PLAN



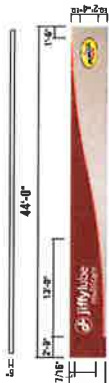
Setback
1 T.B.D.

- Mid block site
- Building faces primary street
- Rear loaded

EXISTING



RECOMMENDATION
"DRAWING SHOWN FOR EXAMPLE ONLY - DO NOT MANUFACTURE FROM THIS DRAWING UNLESS THIS LABEL HAS BEEN REMOVED"



SIGN 2
JL-FF56-6
Dimensional Fascia w/Red Vinyl Accent & Backlit Logo
Scale: 1/16" = 1'-0"

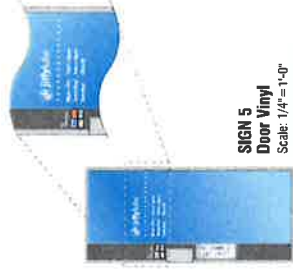


SIGN 3
JL-VES-1
Vehicle Entry Sign
Wall Mounted
(Driver's Side)
Qty: 3
Scale: 1/4" = 1'-0"
Note: When mounted over
down spout, spacer required.

- Customers will enter from the front.



SIGN 4
JL-VES-1
Welcome Sign
Scale: 3/8" = 1'-0"



SIGN 5
Door Vinyl
Scale: 1/4" = 1'-0"
NOTE: FIELD VERIFY
PRIOR TO MANUFACTURING

PROPOSED



SOUTH ELEVATION

SCALE: 3/32" = 1'-0"

| Rev # | Desc | Date | Drawn By | Checked By | Revised Description | Rev # | Head | Date | Drawn By | Checked By |
|-------|------|----------|----------|------------|---------------------|-------|--------|----------|----------|------------|
| 01 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 01 | 000001 | 11/21/25 | XXX | XXX |
| 02 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 02 | 000002 | 11/21/25 | XXX | XXX |
| 03 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 03 | 000003 | 11/21/25 | XXX | XXX |
| 04 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 04 | 000004 | 11/21/25 | XXX | XXX |
| 05 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 05 | 000005 | 11/21/25 | XXX | XXX |
| 06 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 06 | 000006 | 11/21/25 | XXX | XXX |
| 07 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 07 | 000007 | 11/21/25 | XXX | XXX |
| 08 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 08 | 000008 | 11/21/25 | XXX | XXX |
| 09 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 09 | 000009 | 11/21/25 | XXX | XXX |
| 10 | 2025 | 11/21/25 | JF | JF | Project 1900 - 1900 | 10 | 000010 | 11/21/25 | XXX | XXX |

ICON
 Drawing Project File:
 Location:
 1900 N Reynolds Road
 Bryant, AR 72022
 Job #:
 1900
 Job Path:
 Admin\ACCOUNTS\Jiffy Lube\Project_31281\Location\3128_1900_Bryant_AR_R2

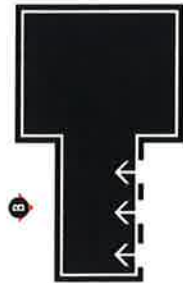
Drawing Project File:
SIGN 1
 Location:
 1900 N Reynolds Road
 Bryant, AR 72022
 Job #:
 1900
 Job Path:
 Admin\ACCOUNTS\Jiffy Lube\Project_31281\Location\3128_1900_Bryant_AR_R2



Location #: 1900

ELEVATION B

SITE PLAN



Setback
1 T.B.D.

- Mid block site
- Building faces primary street
- Rear loaded

EXISTING



"DRAWING SHOWN FOR EXAMPLE ONLY - DO NOT MANUFACTURE FROM THIS DRAWING UNLESS THIS LABEL HAS BEEN REMOVED"

RECOMMENDATION



PROPOSED



NORTH ELEVATION

NOT TO SCALE

| Rev # | Asgt | Date | Rev. By | Issue By | Revision Description | Rev # | Date | Rev. By | Issue By | Revision Description |
|-------|-----------|-----------|---------|----------|----------------------|-------|------------|---------|----------|----------------------|
| 01 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 01 | 03/25/2018 | XXX | XXX | Notes |
| 02 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 02 | 03/25/2018 | XXX | XXX | Notes |
| 03 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 03 | 03/25/2018 | XXX | XXX | Notes |
| 04 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 04 | 03/25/2018 | XXX | XXX | Notes |
| 05 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 05 | 03/25/2018 | XXX | XXX | Notes |
| 06 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 06 | 03/25/2018 | XXX | XXX | Notes |
| 07 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 07 | 03/25/2018 | XXX | XXX | Notes |
| 08 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 08 | 03/25/2018 | XXX | XXX | Notes |
| 09 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 09 | 03/25/2018 | XXX | XXX | Notes |
| 10 | 3/25/2018 | 3/25/2018 | JF | JF | Project start | 10 | 03/25/2018 | XXX | XXX | Notes |

Project # 3128
 Location 1900 N Reynolds Road
 Bryant, AR 72022
 Job No. 1900
 Active ACCOUNT SUJTY-Use Project_3128/Location3128_1900_Bryant_AR_R2

Bryant Planning Commission

LARGE SCALE DEVELOPMENT COMMERCIAL BUILDING CHECKLIST

CITY OF BRYANT
210 SW 3RD STREET
BRYANT, AR 72022
501-943-0309

PC MEETING DATE: SECOND MONDAY OF EACH MONTH
TIME: 6:00 P.M.
PLACE: COURTROOM - BRYANT OFFICE COMPLEX
AGENDA DEADLINE: 5:00 P.M. THREE WEEKS PRIOR TO THE REGULARLY SCHEDULED MEETING DATE

REQUIREMENTS FOR SUBMISSION

LETTER TO PLANNING COMMISSION STATING YOUR REQUEST
COMPLETED CHECKLIST (SUBDIVISION OR BUILDING)
ADA/ABA FORM COMPLETED
TWO FULL SETS OF BUILDING PLANS
20 FOLDED COPIES OF SITE PLAN (MINIMUM SIZE 17" X 34") THAT INCLUDES THE FOLLOWING:
VICINITY MAP - LEGAL DESCRIPTION - LANDSCAPING PLAN
20 FOLDED COPIES OF FLOOR PLAN
20 COPIES OF FRONT AND REAR BUILDING ELEVATIONS
AN IBM COMPATIBLE DISKETTE IN PDF FORMAT
COPY OF ADEQ STORMWATER POLLUTION PREVENTION PLAN FOR PROPERTY PARCEL CONTAINING ONE ACRE OR LARGER.
COPY OF STORMWATER DETENTION APPROVAL BY ENGINEER
\$250.00 FOR STORMWATER DETENTION AND DRAINAGE PLAN REVIEW

ALL REQUIREMENTS LISTED ABOVE MUST BE COMPLETED AND ATTACHED BEFORE SUBMITTING APPLICATION TO BE PLACED ON THE PLANNING COMMISSION AGENDA.

NOTE: WHEN MAKING CHANGES TO AN APPROVED SITE PLAN, A REVISED SITE PLAN MUST BE SUBMITTED TO THE BRYANT PLANNING COMMISSION FOR APPROVAL. THIS MUST BE DONE PRIOR TO IMPLEMENTATION. FAILURE TO COMPLY WILL RESULT IN PENALTIES/FINES BEING IMPOSED IN ACCORDANCE WITH CITY ORDINANCES.

I HAVE COMPLIED WITH THE REQUIREMENTS LISTED ABOVE AND HAVE CHECKED ALL OF THE BOXES ON THE CHECKLIST WHICH APPLY TO THIS PROJECT SUBMITTAL.


SIGNATURE

12-20-16
DATE

City of Bryant Commercial Building Checklist

Name of Development A warehouse for Fleming Electric
Site Location See Attached Exhibit A Current zoning C2
Owner FA Properties Phone 501-847-3090

I. BASIC INFORMATION NEEDED ON THE SITE PLAN

- ▲ 1. Name of Development
- ▲ 2. Current zoning
- ▲ 3. Name and Address of owner of Record
- ▲ 4. Name and address of the architect, landscape architect, engineer, surveyor, or other person involved in the preparation of the plan
- ▲ 5. Date of preparation of the plan
- ▲ 6. Vicinity map locating streets, highways, section lines, railroad, schools, & parks within ½ mile
- ▲ 7. Legal description of the property with exact boundary lines
- ▲ 8. North arrow & Scale
- ▲ 9. Identification of any land areas within the 100 year floodplain and within the 100 year floodway
- ▲ 10. Lot area in square feet
- ▲ 11. Show scale (not less than 1" = 100') (paper size minimum 17" X 34")
- ▲ 12. Existing streams, drainage channels, and other bodies of water
- ▲ 13. Drainage easements for stormwater run-off and detention shown & labeled
- ▲ 14. Location and name of existing streets
- ▲ 15. Show source of water supply
- ▲ 16. Show location of waste water connection to municipal system & sanitary sewer layout
- ▲ 17. Fire Hydrant placement
- ▲ 18. Proposed location of buildings and other structures, parking areas, drives, loading areas, service areas, alleys, walks, screening, and public streets
- ▲ 19. Sufficient dimensions to indicate relationship between buildings, property lines, parking areas and other elements of the plan
- ▲ 20. Extent and character of proposed landscaping. Common and/or Botanical plant names and sizes of new vegetation must be clearly indicated.
- ▲ 21. Location, massing and pattern of existing vegetation to be retained
- ▲ 22. Existing structures on the site
- ▲ 23. Pedestrian and vehicular access points, sidewalks, crosswalks, etc.
- ▲ 24. Typical building elevations depicting the style, size and exterior construction materials of the buildings proposed. Where several building types are proposed on the plan, such as apartments and commercial buildings, a separate sketch shall be prepared for each type. The elevations shall be drawn at a minimum scale of 1/16" to a foot and must show adjoining context.
- ▲ 25. Any variance approvals

II ADDITIONAL INFORMATION NEEDED, BUT NOT ON THE SITE PLAN

COMMERCIAL BUILDING WORKSHEET

| | Yes | No |
|--|-------------------------------------|-------------------------------------|
| Site is compatible with Master Street Plan | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Proposed improvement is within building line setbacks Front _____ ft. Side _____ ft. CNR Side _____ ft. Back _____ ft. | <input type="checkbox"/> | <input type="checkbox"/> |
| Parking requirements can be satisfied | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Floor Space _____ sq.ft. divided by 300 = _____ (no. of parking spaces required) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Improvement is outside 100 year flood plain (if answer is no - Provide 404 Permit for site) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Lowest building floor level and all mechanical equipment are above FEMA 100 year flood elevation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will there be a dumpster located on the site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will there be a construction site office? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Have you made "One Call"? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Structure and site complies with ADA (Americans with Disability Act) and ABA (Architectural Barriers Act) Accessibility Guidelines | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Design complies with Arkansas Plumbing Code and National Electric Code requirements | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Foundation and structure meet earthquake requirements for Zone 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Structure meets Arkansas Energy Code for specified use. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Complies with Arkansas Fire Prevention Code | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Complies with International Code Council regulations | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Will a Site Clearance Permit be required? (City Ordinance 2002-03) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Are you granted any variances by the Board of Adjustment? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If you have been granted a variance please explain in detail: | | |
| | | |
| | | |
| | | |

III. LANDSCAPING COMPLIANCE WITH REQUIREMENTS

| | <u>YES</u> | <u>NO</u> |
|---|--------------------------|--------------------------|
| No planting within 5 feet of a fire hydrant | <input type="checkbox"/> | <input type="checkbox"/> |
| Spacing will be 40' between trees | <input type="checkbox"/> | <input type="checkbox"/> |
| Tree must be a minimum 3" in diameter at the base and 12' + tall | <input type="checkbox"/> | <input type="checkbox"/> |
| Existing trees meeting the minimum size can be counted to meet above criteria | <input type="checkbox"/> | <input type="checkbox"/> |
| No trees can be planted within 30 feet of a property corner or driveway | <input type="checkbox"/> | <input type="checkbox"/> |
| Shrubs along street right-of-way lines cannot exceed 30 inches in height | <input type="checkbox"/> | <input type="checkbox"/> |

IV. SITE COVERAGE COMPLIANCE WITH REQUIREMENTS

(FOR YOUR CONVENIENCE WE HAVE LISTED THE THREE COMMERCIAL ZONING SITE COVERAGE REQUIREMENTS - CHOOSE THE ZONING FOR THIS PROJECT AND COMPLETE ONLY THAT SECTION)

| | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. C-1 Zoning - Neighborhood Commercial | | |
| Lot area: minimum of 2,500 square feet; maximum 16,000 square feet | _____ | _____ |
| Front Yard: none required | _____ | _____ |
| Side Yard: minimum of 5 feet each side | _____ | _____ |
| Rear Yard: minimum of 55 feet | _____ | _____ |
| Maximum lot coverage of 70% of the total area of the site for all principal, accessory buildings, parking lots, sidewalks, private streets, or drives. | _____ | _____ |
| Parking: one space per each 200 sq. ft. of commercial use | _____ | _____ |
| Loading areas: physically separated from all streets with 10 ft grassy area | _____ | _____ |
| When abuts a residential district, a minimum 6' high wood, rock, or masonry fence is required with a landscape screen | _____ | _____ |
| 2. C-2 Zoning - Lots fronting along roadways designated as Interstate 30 and frontage roads, State Highway 5 and 183 | | |
| Front Yard: not less than 50 feet from front property line | _____ | _____ |
| Side Yard: not required, except where they abut a street or a residential lot line then a minimum of 25 feet is required | _____ | _____ |
| Rear Yard: minimum of 15 feet, except where they abut residential area then a minimum of 55 feet is required | _____ | _____ |
| A maximum lot coverage of 35% of the total area of the site for all principal and accessory buildings | _____ | _____ |
| Parking: one space per each 300 sq. ft. of occupied space | _____ | _____ |
| When abuts a residential district, a minimum 6' high wood, rock, or masonry fence is required with a landscape screen | _____ | _____ |
| 3. C-2 Zoning - Lots fronting along roadways designated as interior local. | | |
| Front Yard: none required | _____ | ✓ |
| Side Yard: not required, except where they abut a street or a residential lot line then a minimum of 25 percent of lot dimension | _____ | ✓ |
| Rear Yard: minimum of 15 feet, except where they abut residential area then a minimum of 55 feet is required | _____ | ✓ |
| A maximum lot coverage of 85% of the total area of the site for all principal, accessory buildings and parking | _____ | ✓ |
| Parking: one space per each 300 sq. ft. of occupied space | _____ | _____ ? |
| When abuts a residential district, a minimum 6' high wood, rock, or masonry fence is required with a landscape screen | ✓ | _____ |

V. SITE PLAN ATTACHMENTS

(APPLICATION WILL NOT BE ACCEPTED UNTIL ALL ATTACHMENT REQUIREMENTS ARE MET)

- ▲ 26. Letter to Planning Commission stating your request
- ▲ 27. Completed Checklist
- ▲ 28. Completed ADA/ABA Form
- ▲ 29. Two full sets of Building Plans
- ▲ 30. 20 copies of Site Plan (folded to no larger than 8 ½ X 14 size) that includes vicinity map and landscaping plan (minimum size 17" X 34" paper)
- ▲ 31. 20 copies of Landscaping Plan (folded to no larger than 8 ½ X 14 size)
- ▲ 32. 20 copies of building floor plan (folded to no larger than 8 ½ X 14 size)
- ▲ 33. Copy of Stormwater Detention approval
- ▲ 34. Copy of ADEQ Stormwater Pollution Prevention Plan for property containing one acre or larger.
- ▲ 35. IBM compatible diskette or CD with data in PDF format.
- ▲ 36. Receipt for \$250.00 for Stormwater Detention and Drainage Plan review

I CERTIFY that the design of Fleming Electric in the City of Bryant, Arkansas complies with the above regulations, laws and codes.

[Signature]
Owner
P.O. box 856
Mailing Address
Bryant Ar. 72029
City

with M.F. [Signature]
Engineer/Architect

Phone #
12-19-16
Date

CITY USE

Action Taken:

Special Conditions:

| | | |
|---------------------------|--------------|-----------------|
| Permit Issued: Date _____ | Sq.Ft. _____ | Amount \$ _____ |
|---------------------------|--------------|-----------------|

| |
|---|
| Construction Completed Certified For Occupancy: Date: _____ |
| Inspector: _____ |

Permit No. _____

BUILDING PERMIT

ADA/ABA ACCESSIBILITY STANDARDS

The *Americans with Disability Act* and *Architectural Barriers Act* Accessibility Guidelines were prepared by the U.S. Access Board and mandated by the U. S. Department of Justice regulations implementing Title III as the official ADA/ABA accessibility guidelines. All new construction, remodeling, and modifications must conform to these building standards for places of public accommodation and commercial facilities. Residential is exempt.

The ADA/ABA accessibility guidelines contain general design standards for building and site elements, such as accessible entrances and routes, ramps, parking spaces, stairs, elevators, restrooms, signage, etc. Also included are specific standards for restaurants, medical care facilities, libraries and transportation facilities and vehicles, and places of lodging.

The guidelines also include "scoping" requirements that outline the necessary features or appropriate quantity for achieving ready access. For example, at least 50 percent of all public entrances to buildings must be accessible with an accessible path of travel. In public restrooms, at least one bathroom stall must be accessible unless there are more than six stalls, in which case the number increases.

I hereby certify that I have read and examined the above notice and will comply with all guidelines of the ADA Accessibility Guidelines. I further understand that a copy of the ADA/ABA Regulations are available for inspection during business hours of City Hall or I may obtain a copy by writing:

The Access Board
1331 F Street, NW, Suite 1000
Washington, DC 20004-1111
(202) 272-0080 (v) (202) 272-0082 (TTY) (202) 272-0081 (fax)
(800) 872-2253 (v) (800) 993-2822 (TTY)
email: info@access-board.gov

Signature of Contractor
or Authorized Agent



Date 12-19-16

Signature of Owner
(if owner-builder)



Date 12-19-16

Application of Permit Approved: _____ Date _____
Commission - Chairman

Bryant Water & Sewer Department

GREASE TRAP STANDARDS

The City of Bryant requires all commercial buildings comply with plumbing codes found in the Arkansas State Plumbing Code, Latest Edition. All new construction, remodeling, and modifications must conform to these plumbing standards for places of public accommodation and commercial facilities. These guidelines contain general design standards for construction and site elements relating to plumbing.

As of 7/27/04, the Bryant Sewer & Water Commission requires stringent specification standards for commercial or public businesses that involve any food preparation on the premise. The new standard requires calculations, and associated data to be submitted to the Bryant Water Utilities General Manager concurrent with the proposed building plumbing plans along with a grease trap calculation form. Building Permits will not be issued until this form has been received and approved by the Bryant Water Utilities General Manager.

All new buildings or strip centers containing sections designated for commercial enterprise are encouraged to provide a stub-out for a separate waste line for future grease interceptor installation. The owner of a new strip center shall consider suitable physical property space and sewer gradient that will be conducive for the installation of an exterior, in-ground grease interceptor(s) for any flex space contained within the strip center. Physical Property Restrictions and sewer gradient shall not be a defense for failure to install an exterior, in-ground grease interceptor.

I hereby certify that I have read and examined the above notice and will comply with all guidelines of the City of Bryant Water & Sewer Department. I further understand that copies of the Grease Interceptor Design and Structural Criteria regulations will be available from the Bryant Water/Wastewater Plant (501-847-8083) during business hours.

Project Name A Warehouse for Fleming Electric

Signature of Contractor or Authorized Agent [Signature] Date 12-19-16

Signature of Owner (if owner-builder) [Signature] Date 12-19-16

Calculations Approved: _____ Date _____
Bryant Water Utilities General Manager

December 7, 2016

Bryant Planning Commission
210 SW 3rd Street
Bryant, AR 72022

Subject: Request for Large Scale Development Commercial Building Approval

Dear Sir or Madam:

Please accept this letter to serve as our application for the above referenced submittal. We wish for this application to be reviewed and accepted by the Planning Department and placed on the December 12, 2017 Planning Commission Meeting Agenda. It is our understanding that our application will go through the Planning Commission Meeting on December 12, 2017 to be added to the Agenda to be heard and approved at the Planning Commission Meeting on January 9, 2017.

Our request is to allow construction of a 22,500 square foot commercial building to include an office area and a warehouse. Please see attachment "A" for a legal description of the properties which are currently zoned C-2. Included with this request is the following:

- Completed Large Scale Development Commercial Building Checklist
- Completed ADA/ABA Form
- 2 Sets of Building Plans
- 8 Folded Copies of the Site Plan
- 8 Folded Copies of the Floor Plan
- 8 Copies of the Front and Rear Building Elevations
- 1 IBM Compatible Diskette in PDF Format
- 1 Copy of ADEQ Stormwater Pollution Prevention Plan
- 1 Copy of Stormwater Detention Approval by Engineer
- \$250.00 for Stormwater Detention and Drainage Plan Review

Thank you in advance for your consideration in this matter,

Lorin Fleming
Owner

Exhibit "A"

Part of the Northwest Quarter of the Southwest Quarter of Section 22, Township 1 South, Range 14 West, Saline County, Arkansas, described as follows:

Beginning at a point that is 540 feet South and 222 feet West of the Northeast Corner of said NW 1/4 of SW 1/4; running thence South 538 feet; thence West 202 feet; thence North 536 feet; thence East 202 feet to the point of beginning, containing 2.45 acres, more or less.

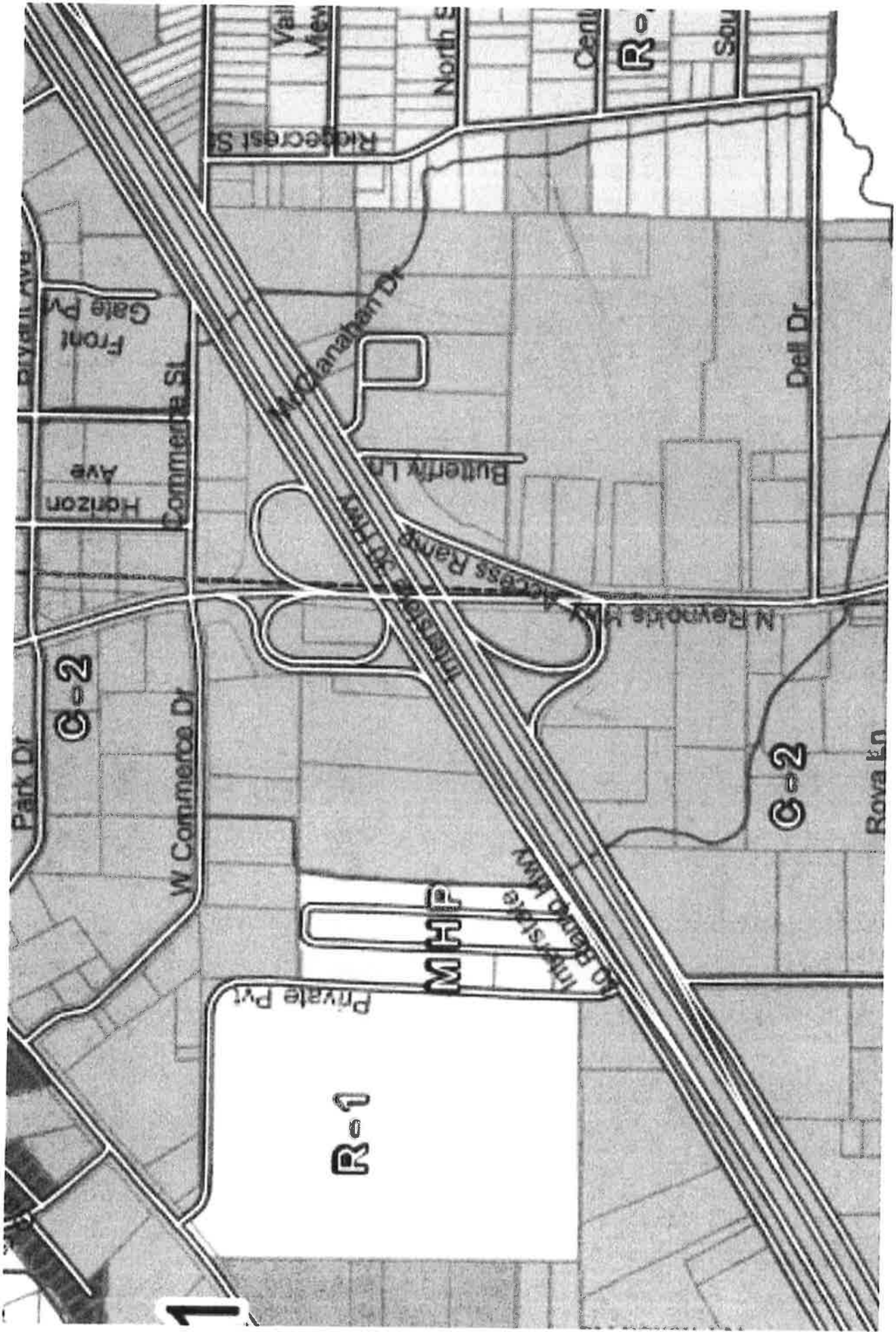
ALSO, a non-exclusive easement for public roadway purposes only over and across the North 30 feet of the following described lands: Part of the Northwest Quarter of the Southwest Quarter of Section 22, Township 1 South, Range 14 West, Saline County, Arkansas, described as follows:

Beginning at a point that is 540 feet South and 424 feet west of the Northeast Corner of said NW 1/4 of SW 1/4 and run thence South 536 feet; run thence West 446 feet; run thence North for 465 feet to the right of way line of Highway 30; run thence 130 feet in a Northeasterly direction along said right of way line; run thence East for 336 feet to the point of beginning.

Part of the Northwest Quarter of the Southwest Quarter of Section 22, Township 1 South, Range 14 West, Saline County, Arkansas, described as follows:

Beginning at a point that is 540 feet South of the Northeast Corner of said NW 1/4 of SW 1/4; running thence South 540 feet; thence West 222 feet; thence North 538 feet; thence East 222 feet to the point of beginning, containing 2.75 acres, more or less.

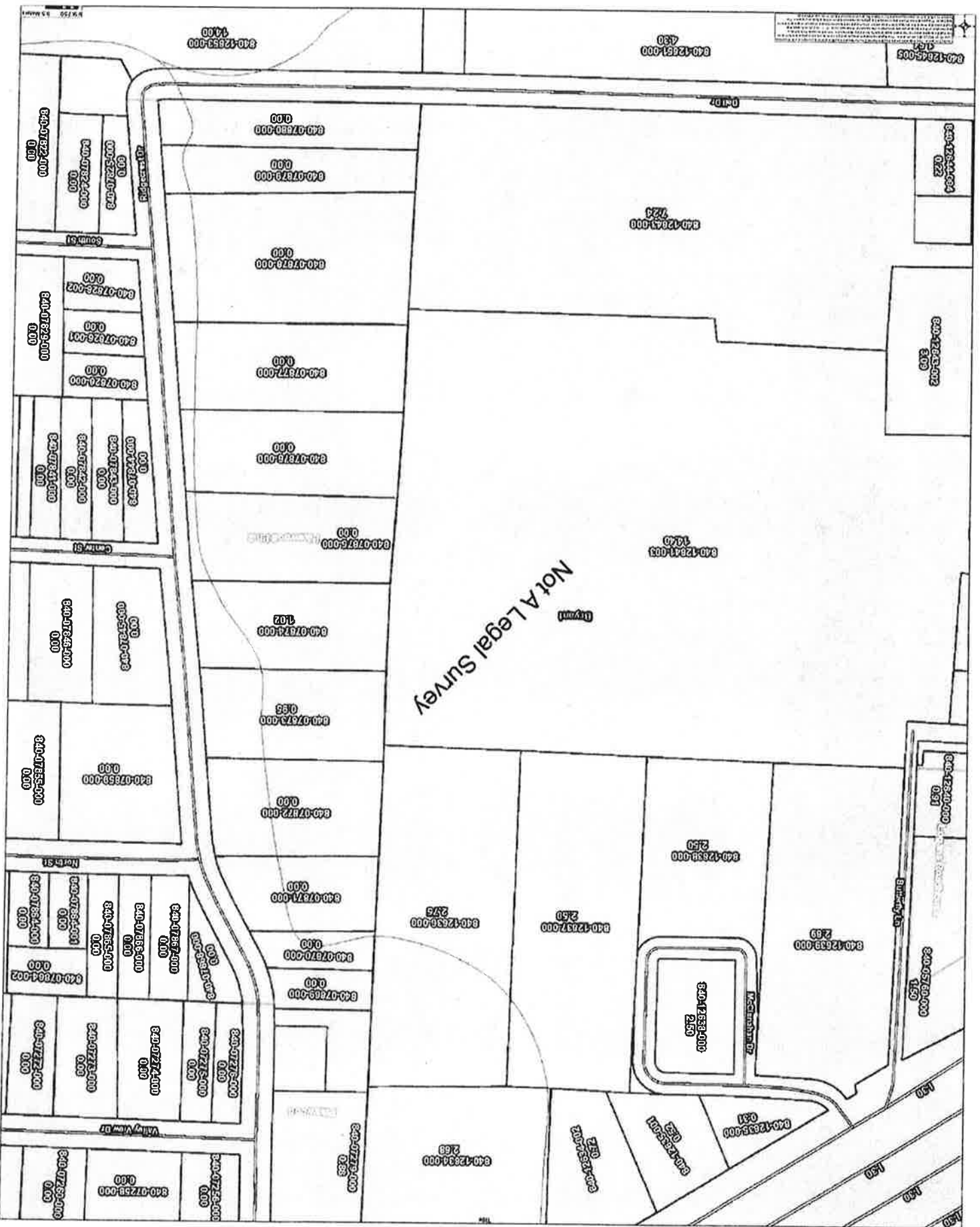
Lots 98, 99 & 100, Pikewood Subdivision, Phase 2, to the City of Bryant, Saline County, Arkansas.



1

NOT A LEGAL SURVEY

NOT A LEGAL SURVEY



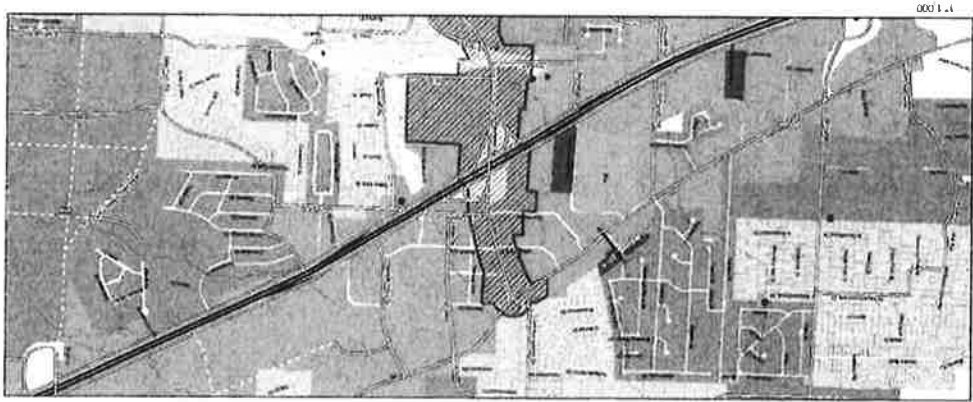
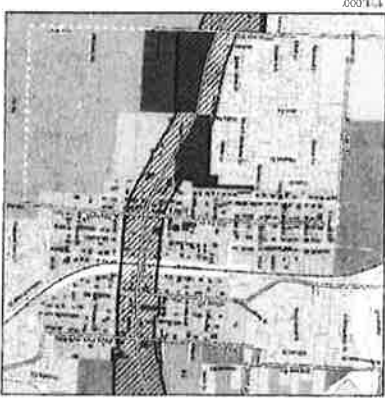
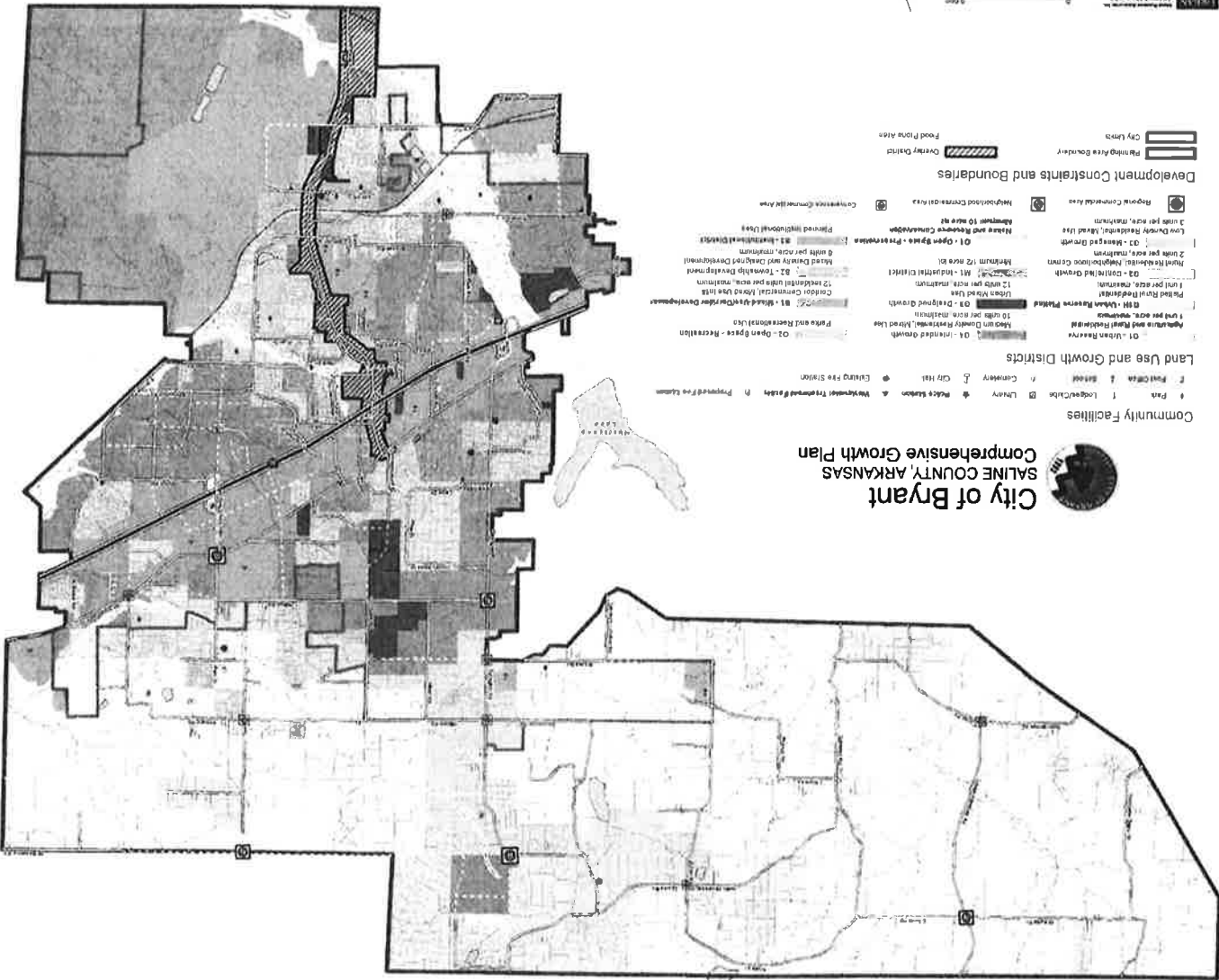
City of Bryant
SAINE COUNTY, ARKANSAS
Comprehensive Growth Plan



- Community Facilities**
- 1 Park
 - 2 Post Office
 - 3 Library
 - 4 Cemetery
 - 5 City Hall
 - 6 Highway/ Freeway
 - 7 Proposed Freeway
 - 8 Existing Fire Station

- Land Use and Growth Districts**
- Q1 - Urban Reserve
 - Q2 - Open Space - Recreation
 - Q3 - Medium Density Residential, Mixed Use
 - Q4 - Inland Growth
 - Q5 - Urban Growth
 - Q6 - Urban Reserve
 - Q7 - Urban Reserve
 - Q8 - Urban Reserve
 - Q9 - Urban Reserve
 - Q10 - Urban Reserve
 - Q11 - Urban Reserve
 - Q12 - Urban Reserve
 - Q13 - Urban Reserve
 - Q14 - Urban Reserve
 - Q15 - Urban Reserve
 - Q16 - Urban Reserve
 - Q17 - Urban Reserve
 - Q18 - Urban Reserve
 - Q19 - Urban Reserve
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 - Q43 - Urban Reserve
 - Q44 - Urban Reserve
 - Q45 - Urban Reserve
 - Q46 - Urban Reserve
 - Q47 - Urban Reserve
 - Q48 - Urban Reserve
 - Q49 - Urban Reserve
 - Q50 - Urban Reserve

- Development Constraints and Boundaries**
- Regional Commercial Area
 - Major Commercial Area
 - Neighborhood Commercial Area
 - Community Commercial Area
 - Food Plaza Area
 - City Limits
 - Planning Area Boundary





Federal Emergency Management Agency

Washington, D.C. 20472

October 28, 2015

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

IN REPLY REFER TO:

Case No.: 14-06-3881R

The Honorable Jill Dabbs
Mayor, City of Bryant
210 Southwest 3rd Street
Bryant, AR 72022

Community Name: City of Bryant, AR
Community No.: 050308

Dear Mayor Dabbs:

We are providing our comments with the enclosed Conditional Letter of Map Revision (CLOMR) on a proposed project within your community that, if constructed as proposed, could revise the effective Flood Insurance Rate Map for your community.

If you have any general questions regarding the floodplain management regulations for your community, the National Flood Insurance Program (NFIP), or technical questions regarding this CLOMR, please contact the Director, Mitigation Division of the Federal Emergency Management Agency (FEMA) Regional Office in Denton, Texas, at (940) 898-5127, or the FEMA Map Information eXchange (FMIX) toll free at 1-877-336-2627 (1-877-FEMA MAP). Additional information about the NFIP is available on our website at <http://www.fema.gov/nfip>.

Sincerely,

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration

List of Enclosures:

Conditional Letter of Map Revision Comment Document

cc: Mr. Greg Huggs
Code Enforcement Director
City of Bryant

Mr. William McFadden, P.E.
Hope Consulting, Inc.



Federal Emergency Management Agency

Washington, D.C. 20472

CONDITIONAL LETTER OF MAP REVISION COMMENT DOCUMENT

| COMMUNITY INFORMATION | | PROPOSED PROJECT DESCRIPTION | BASIS OF CONDITIONAL REQUEST |
|--|---|--|---|
| COMMUNITY | City of Bryant Saline County Arkansas | CHANNELIZATION CULVERT | FLOODWAY HYDRAULIC ANALYSIS HYDROLOGIC ANALYSIS UPDATED TOPOGRAPHIC DATA |
| | COMMUNITY NO.: 400046 | | |
| IDENTIFIER | Crooked Creek Tributary Flood Study | APPROXIMATE LATITUDE AND LONGITUDE: 34.618, -92.493 SOURCE: USGS QUADRANGLE DATUM: NAD 83 | |
| AFFECTED MAP PANELS | | | |
| TYPE: FIRM* NO.: 05012C0380D DATE: June 19, 2012 | | * FIRM - Flood Insurance Rate Map | |

FLOODING SOURCE AND REACH DESCRIPTION

Crooked Creek Tributary – from confluence with Crooked Creek to approximately 2,330 feet upstream of confluence with Crooked Creek

PROPOSED PROJECT DESCRIPTION

| Flooding Source | Proposed Project | Location of Proposed Project |
|-------------------------|-----------------------|---|
| Crooked Creek Tributary | Channelization | from approximately 1,370 feet upstream of confluence with Crooked Creek to approximately 2,110 feet upstream of confluence with Crooked Creek |
| | New (details) Culvert | Approximately 1,160 feet upstream of the confluence with Crooked Creek Tributary |

SUMMARY OF IMPACTS TO FLOOD HAZARD DATA

| Flooding Source | Effective Flooding | Proposed Flooding | Increases | Decreases |
|-------------------------|--------------------|-------------------|-----------|-----------|
| Crooked Creek Tributary | Floodway | Floodway | Yes | Yes |
| | Zone AE | Zone AE | Yes | Yes |
| | BFEs* | BFEs | Yes | Yes |

* BFEs - Base (1-percent-annual-chance) Flood Elevations

COMMENT

This document provides the Federal Emergency Management Agency's (FEMA's) comment regarding a request for a CLOMR for the project described above. This document is not a final determination; it only provides our comment on the proposed project in relation to the flood hazard information shown on the effective National Flood Insurance Program (NFIP) map. We reviewed the submitted data and the data used to prepare the effective flood hazard information for your community and determined that the proposed project meets the minimum floodplain management criteria of the NFIP. Your community is responsible for approving all floodplain development and for ensuring that all permits required by Federal or State/Commonwealth law have been received. State/Commonwealth, county, and community officials, based on their knowledge of local conditions and in the interest of safety, may set higher standards for construction in the Special Flood Hazard Area (SFHA), the area subject to inundation by the base flood. If the State/Commonwealth, county, or community has adopted more restrictive or comprehensive floodplain management criteria, these criteria take precedence over the minimum NFIP criteria.

This comment is based on the flood data presently available. If you have any questions about this document, please contact the FEMA Map Information eXchange (FMIX) toll free at 1-877-336-2627 (1-877-FEMA MAP) or by letter addressed to the LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304. Additional Information about the NFIP is available on the FEMA Web site at <http://www.fema.gov/nfip>.

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



Federal Emergency Management Agency
Washington, D.C. 20472

**CONDITIONAL LETTER OF MAP REVISION
COMMENT DOCUMENT (CONTINUED)**

COMMUNITY INFORMATION

To determine the changes in flood hazards that will be caused by the proposed project, we compared the hydraulic modeling reflecting the proposed project (referred to as the proposed conditions model) to the hydraulic modeling used to prepare the Flood Insurance Study (FIS) (referred to as the effective model). If the effective model does not provide enough detail to evaluate the effects of the proposed project, an existing conditions model must be developed to provide this detail. This existing conditions model is then compared to the effective model and the proposed conditions model to differentiate the increases or decreases in flood hazards caused by more detailed modeling from the increases or decreases in flood hazards that will be caused by the proposed project.

The table below shows the changes in the BFEs:

BFE Comparison Table

| Flooding Source: Crooked Creek Tributary | | BFE Change (feet) | Location of maximum change |
|--|------------------|-------------------|--|
| Existing vs. Effective | Maximum increase | 2.4 | Approximately 2,110 feet upstream of the confluence with Crooked Creek |
| | Maximum decrease | 1.6 | Approximately 1,370 feet upstream of the confluence with Crooked Creek |
| Proposed vs. Existing | Maximum increase | None | |
| | Maximum decrease | 1.1 | Approximately 1,300 feet upstream of the confluence with Crooked Creek |
| Proposed vs. Effective | Maximum increase | 2.3 | Approximately 2,110 feet upstream of the confluence with Crooked Creek |
| | Maximum decrease | 1.8 | Approximately 1,370 feet upstream of the confluence with Crooked Creek |

NFIP regulations Subparagraph 60.3(b)(7) requires communities to ensure that the flood-carrying capacity within the altered or relocated portion of any watercourse is maintained. This provision is incorporated into your community's existing floodplain management ordinances; therefore, responsibility for maintenance of the altered or relocated watercourse, including any related appurtenances such as bridges, culverts, and other drainage structures, rests with your community. We may request that your community submit a description and schedule of maintenance activities necessary to ensure this requirement.

This comment is based on the flood data presently available. If you have any questions about this document, please contact the FEMA Map Information eXchange (FMIX) toll free at 1-877-336-2627 (1-877-FEMA MAP) or by letter addressed to the LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304. Additional information about the NFIP is available on the FEMA Web site at <http://www.fema.gov/nfip>.

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



Federal Emergency Management Agency

Washington, D.C. 20472

CONDITIONAL LETTER OF MAP REVISION COMMENT DOCUMENT (CONTINUED)

COMMUNITY INFORMATION (CONTINUED)

DATA REQUIRED FOR FOLLOW-UP LOMR

Upon completion of the project, your community must submit the data listed below and request that we make a final determination on revising the effective FIRM. If the project is built as proposed and the data below are received, a revision to the FIRM would be warranted.

- Detailed application and certification forms must be used for requesting final revisions to the maps. Therefore, when the map revision request for the area covered by this letter is submitted, Form 1, entitled "Overview and Concurrence Form," must be included. A copy of this form may be accessed at <https://www.fema.gov/media-library/assets/documents/1343>.

- The detailed application and certification forms listed below may be required if as-built conditions differ from the proposed plans. If required, please submit new forms, which may be accessed at <https://www.fema.gov/media-library/assets/documents/1343>, or annotated copies of the previously submitted forms showing the revised information.

Form 2, entitled "Riverine Hydrology and Hydraulics Form." Hydraulic analyses for as-built conditions of the base flood, the 10-percent, 2-percent, and 0.2-percent-annual-chance floods, and the regulatory floodway, must be submitted with Form 2.

Form 3, entitled "Riverine Structures Form."

- A certified topographic work map showing the revised and effective base annual chance floodplain and floodway boundaries. Please ensure that the revised information ties-in with the current effective information at the downstream and upstream ends of the revised reach.
- An annotated copy of the FIRM, at the scale of the effective FIRM, that shows the revised base floodplain and floodway boundary delineations shown on the submitted work map and how they tie-in to the base and 0.2-percent-annual-chance floodplain and floodway boundary delineations shown on the current effective FIRM at the downstream and upstream ends of the revised reach.
- As-built plans, certified by a registered Professional Engineer, of all proposed project elements.
- A copy of the public notice distributed by your community stating its intent to revise the regulatory floodway, or a signed statement by your community that it has notified all affected property owners and affected adjacent jurisdictions.
- Documentation of the individual legal notices sent to property owners who will be affected by any widening or shifting of the base floodplain and/or any BFE increases along Crooked Creek Tributary.

This comment is based on the flood data presently available. If you have any questions about this document, please contact the FEMA Map Information eXchange (FMIX) toll free at 1-877-336-2627 (1-877-FEMA MAP) or by letter addressed to the LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304. Additional information about the NFIP is available on the FEMA Web site at <http://www.fema.gov/nfip>.

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



Federal Emergency Management Agency

Washington, D.C. 20472

CONDITIONAL LETTER OF MAP REVISION COMMENT DOCUMENT (CONTINUED)

COMMUNITY INFORMATION (CONTINUED)

DATA REQUIRED FOR FOLLOW-UP LOMR (continued)

• FEMA's fee schedule for reviewing and processing requests for conditional and final modifications to published flood information and maps may be accessed at <https://www.fema.gov/forms-documents-and-software/flood-map-related-fees>. The fee at the time of the map revision submittal must be received before we can begin processing the request. Payment of this fee can be made through a check or money order, made payable in U.S. funds to the National Flood Insurance Program, or by credit card (Visa or MasterCard only). Please either forward the payment, along with the revision application, to the following address:

LOMC Clearinghouse
Attention: LOMR Manager
847 South Pickett Street
Alexandria, Virginia 22304-4605

or submit the LOMR using the LOMC portal at <https://hazards.fema.gov/femaportal/online/locm/signin>.

After receiving appropriate documentation to show that the project has been completed, FEMA will initiate a revision to the FIRM. Because the flood hazard information (i.e., base flood elevations, base flood depths, SFHAs, zone designations, and/or regulatory floodways) will change as a result of the project, a 90-day appeal period will be initiated for the revision, during which community officials and interested persons may appeal the revised flood hazard information based on scientific or technical data.

This comment is based on the flood data presently available. If you have any questions about this document, please contact the FEMA Map Information eXchange (FMIX) toll free at 1-877-336-2627 (1-877-FEMA MAP) or by letter addressed to the LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304. Additional information about the NFIP is available on the FEMA Web site at <http://www.fema.gov/nfip>.

A handwritten signature in black ink, appearing to read "Luis Rodriguez".

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



Federal Emergency Management Agency

Washington, D.C. 20472

CONDITIONAL LETTER OF MAP REVISION COMMENT DOCUMENT (CONTINUED)

COMMUNITY INFORMATION (CONTINUED)

COMMUNITY REMINDERS

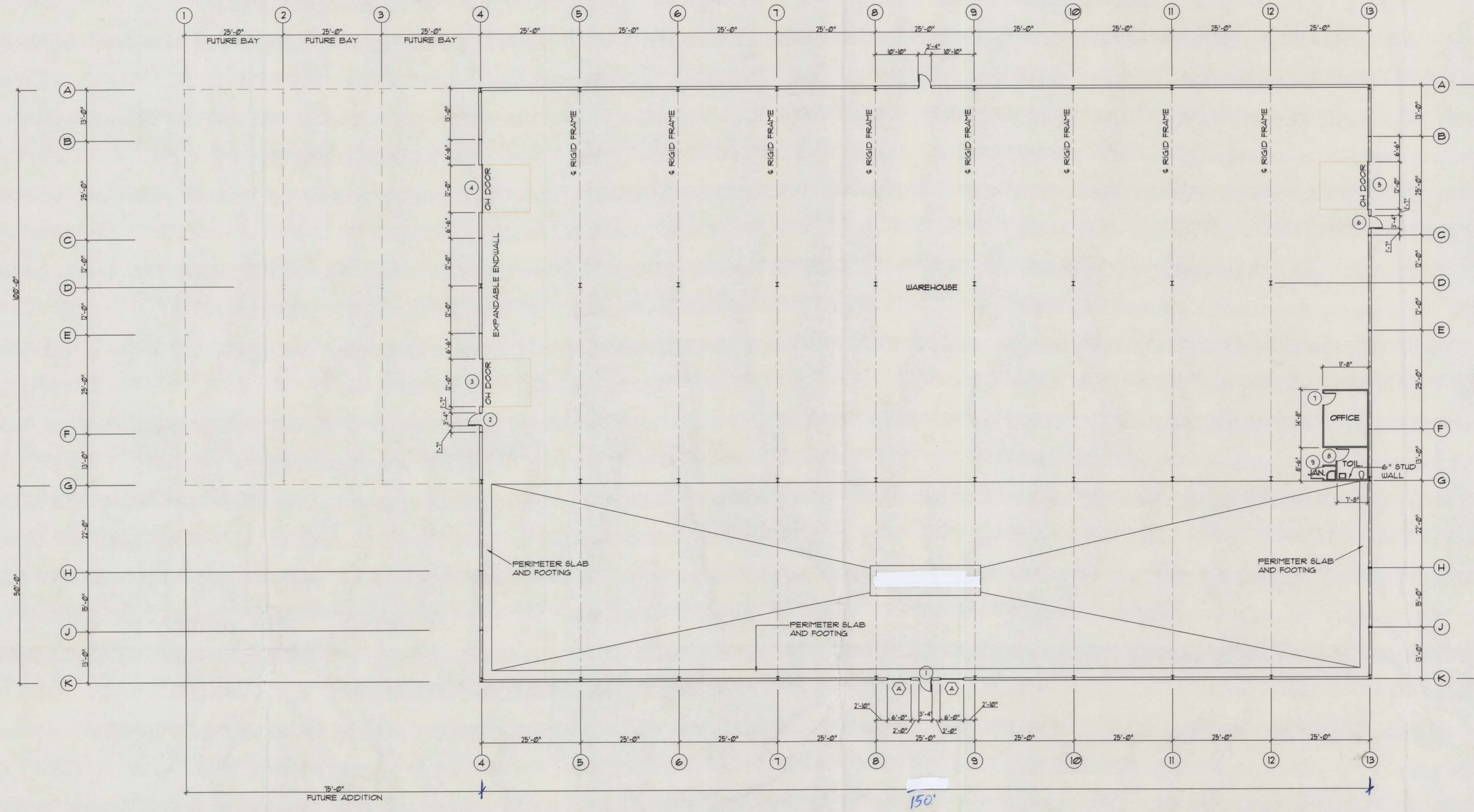
We have designated a Consultation Coordination Officer (CCO) to assist your community. The CCO will be the primary liaison between your community and FEMA. For information regarding your CCO, please contact:

Ms. Sandy Keefe
Director, Mitigation Division
Federal Emergency Management Agency, Region VI
Federal Regional Center, Room 206
800 North Loop 288
Denton, TX 76209
(940) 898-5127

This comment is based on the flood data presently available. If you have any questions about this document, please contact the FEMA Map Information eXchange (FMIX) toll free at 1-877-336-2627 (1-877-FEMA MAP) or by letter addressed to the LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304. Additional information about the NFIP is available on the FEMA Web site at <http://www.fema.gov/nfip>.

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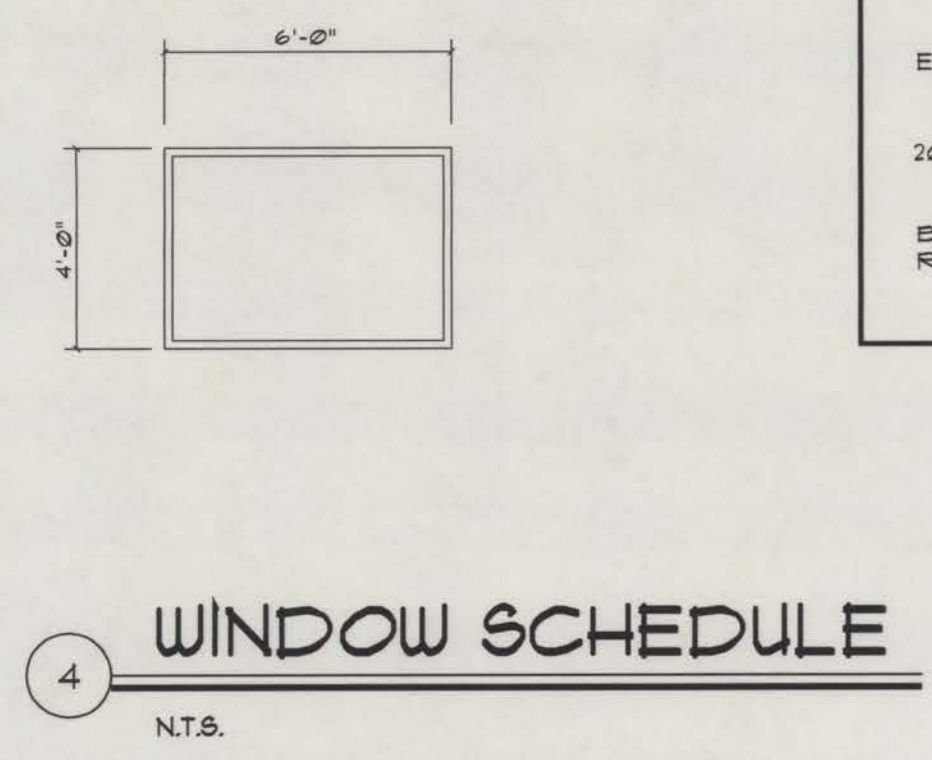
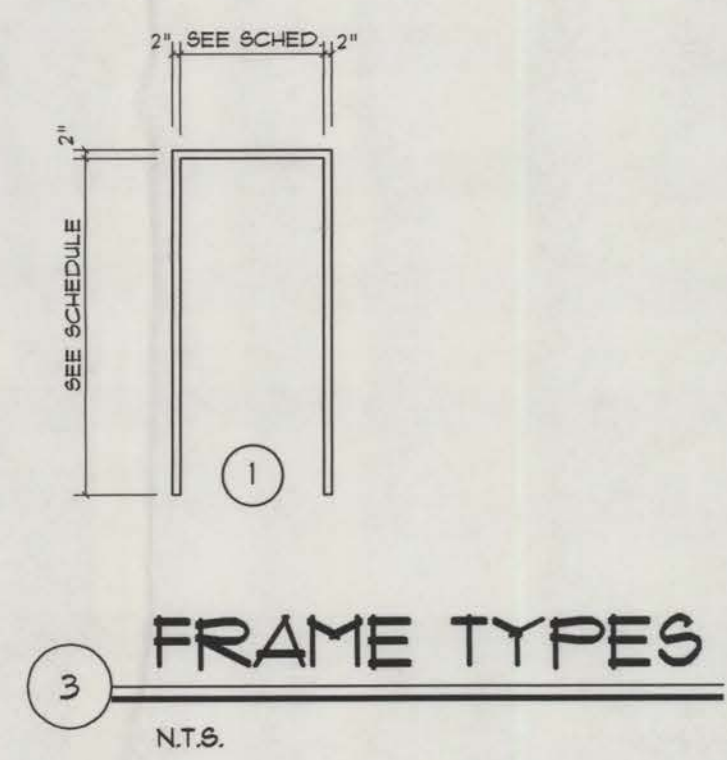
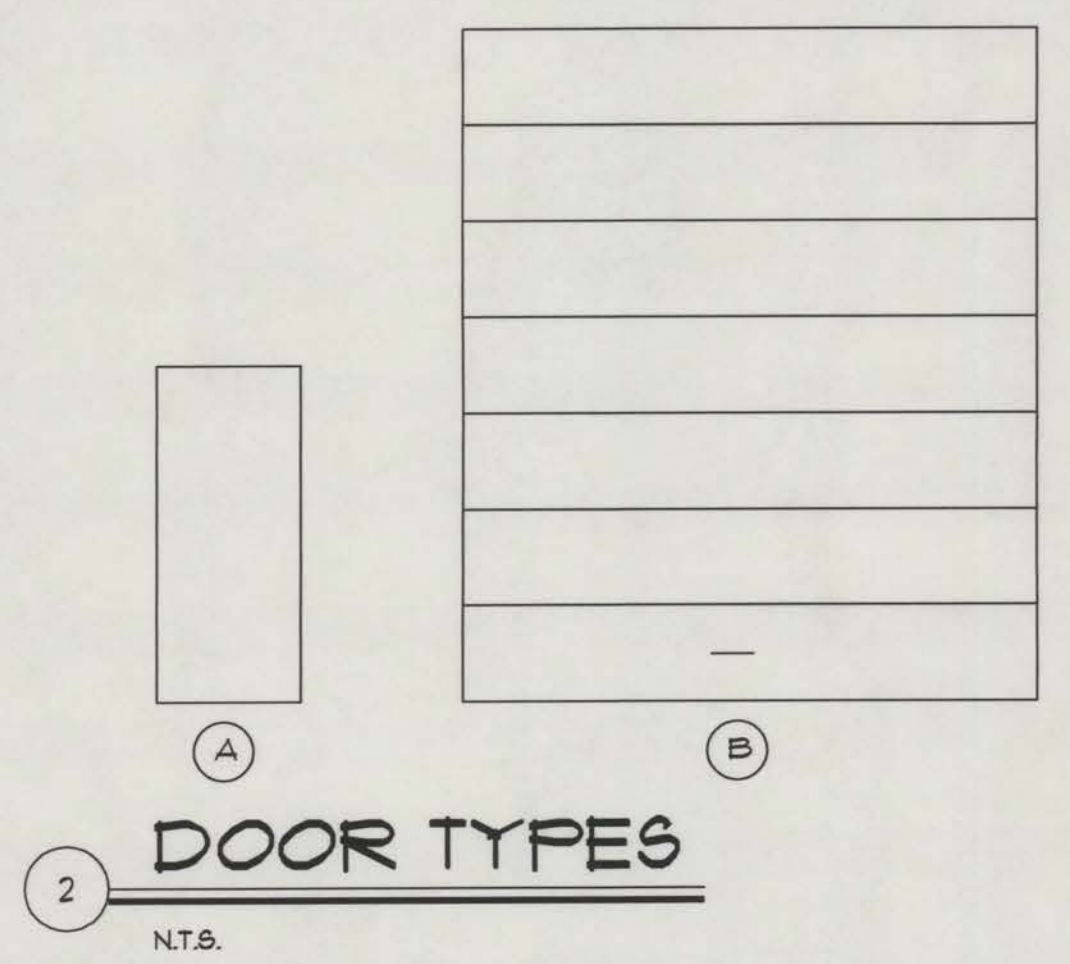
Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



1 FLOOR PLAN
1/16" = 1'-0"

| FINISH SCHEDULE | | | | | | | | | | | | | | |
|-----------------|-------|------------|---|---|--------------------|---|---|--------------------|---|---|----------|---------|----|-------|
| ROOM NAME | FLOOR | BASE | | | WALLS | | | CEILING | | | CLG. HT. | REMARKS | | |
| | | VINYL TILE | | | GYF. BOARD (PAINT) | | | GYF. BOARD (PAINT) | | | | | | |
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| OFFICE | 1 | | | | 4 | | | 1 | | | | 11 | | 8'-0" |
| TOILET | 1 | | | | 4 | | | 1 | | | | 11 | | 8'-0" |
| JANITOR | 1 | | | | 4 | | | 1 | | | | 11 | | 8'-0" |

| DOOR SCHEDULE | | | | | | |
|---------------|------------------------|------|------|-------|------|-------------------------|
| OPNG. NO. | DOOR | | | FRAME | | REMARKS |
| | SIZE | TYPE | MAT. | TYPE | MAT. | |
| 1 | 3'-0" x 7'-0" x 1-3/4" | A | HM | 1 | HM | |
| 2 | 3'-0" x 7'-0" x 1-3/4" | A | HM | 1 | HM | |
| 3 | 12' W x 14' H | B | --- | --- | --- | OVERHEAD DOOR AND FRAME |
| 4 | 12' W x 14' H | B | --- | --- | --- | OVERHEAD DOOR AND FRAME |
| 5 | 12' W x 14' H | B | --- | --- | --- | OVERHEAD DOOR AND FRAME |
| 6 | 3'-0" x 7'-0" x 1-3/4" | A | HM | 1 | HM | |
| 7 | 3'-0" x 7'-0" x 1-3/4" | A | HM | 1 | HM | |
| 8 | 3'-0" x 7'-0" x 1-3/4" | A | HM | 1 | HM | |
| 9 | 3'-0" x 7'-0" x 1-3/4" | A | HM | 1 | HM | |



ARCHITECTURAL BUILDING CODE CRITERIA:

BUILDING CODE: IBC 2009, AFPC 2012 VOL. II
 OCCUPANCY: STORAGE (S1)
 CONSTRUCTION TYPE: TYPE III, FULLY FIRE SPRINKLERED PER NFPA 13

BUILDING AREA: 22,500 SF
 AREA PERMITTED WITH FRONTAGE 4 SPRINKLER INCREASE: 11,500
 13,125
 22,500
 83,125 SF MAX. AREA ALLOWED

NEW BUILDING HEIGHT: 1 STORY
 BUILDING HEIGHT PERMITTED: 3 STORIES

CONSTRUCTION REQUIREMENTS:
 FIRE RESISTANCE RATING: 0 HOURS
 FIRE SEPARATION DISTANCE: GREATER THAN 30 FEET

OCCUPANCY SEPARATION: NONE REQUIRED (TABLE 508.3.3)

EXIT ACCESS STRATEGY:
 FOUR EXITS DIRECTLY TO EXTERIOR

2004 ARKANSAS ENERGY CODE COMPLIANCE

BUILDING IS PRE-ENGINEERED METAL BUILDING STRUCTURE.
 REFER TO STRUCTURAL PLANS FOR BUILDING CODE AND LOADING REQUIREMENTS.



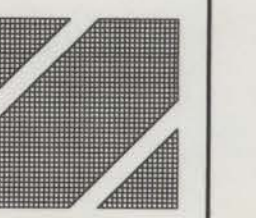
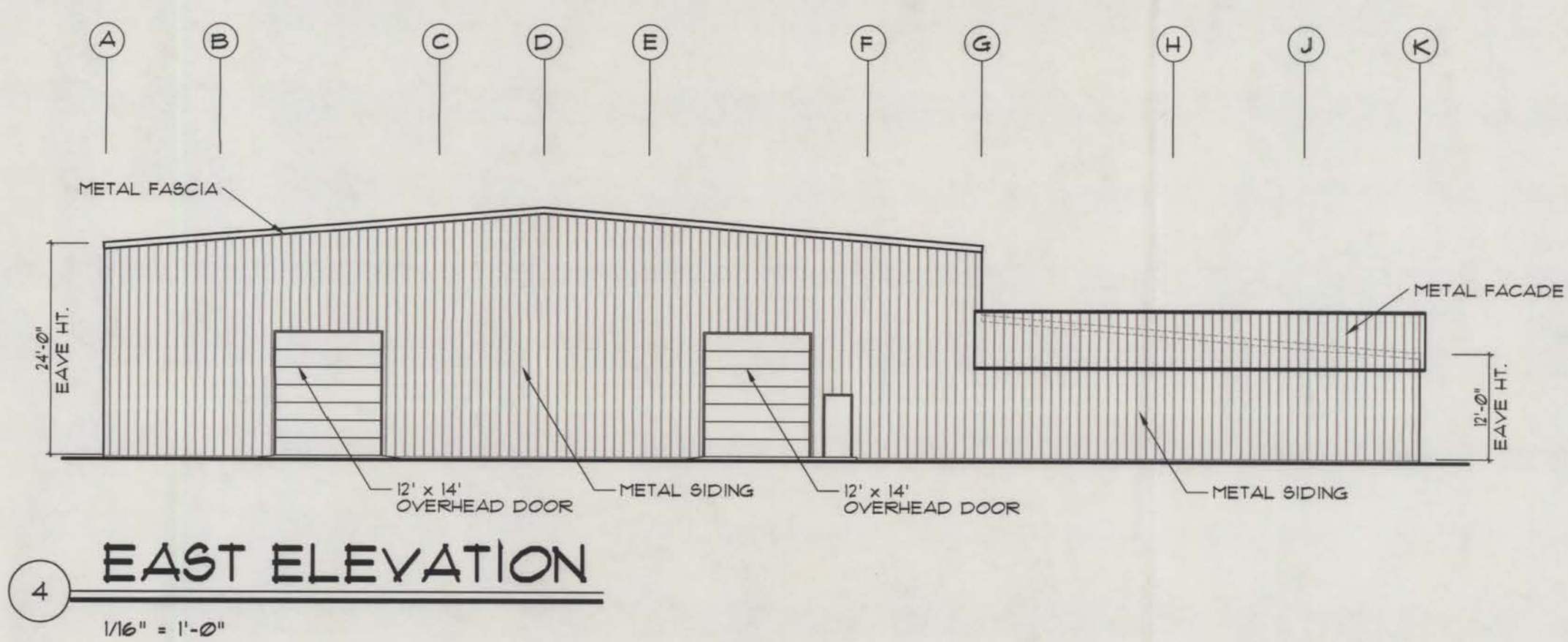
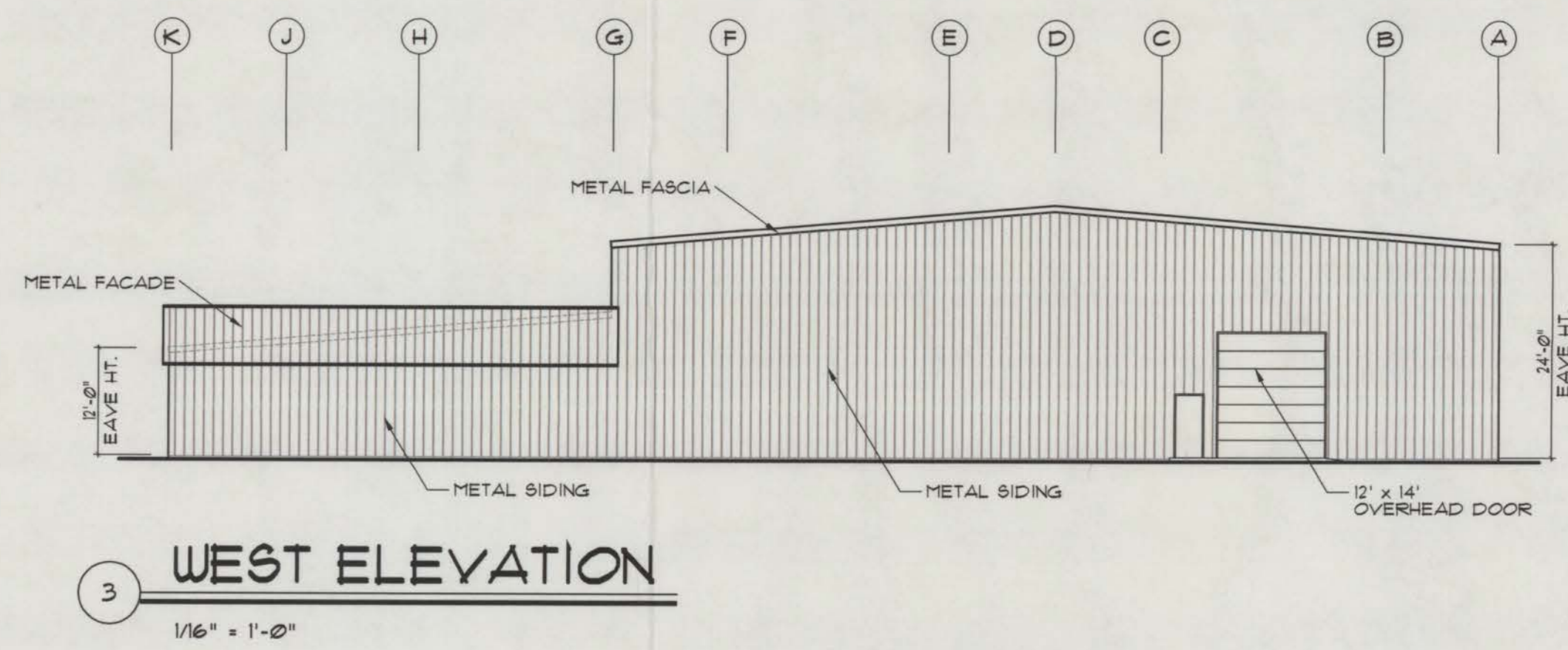
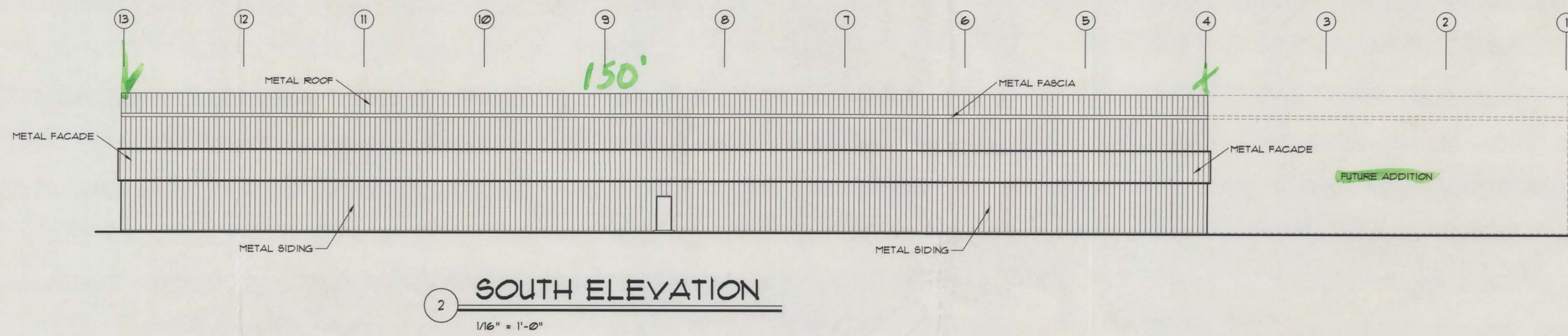
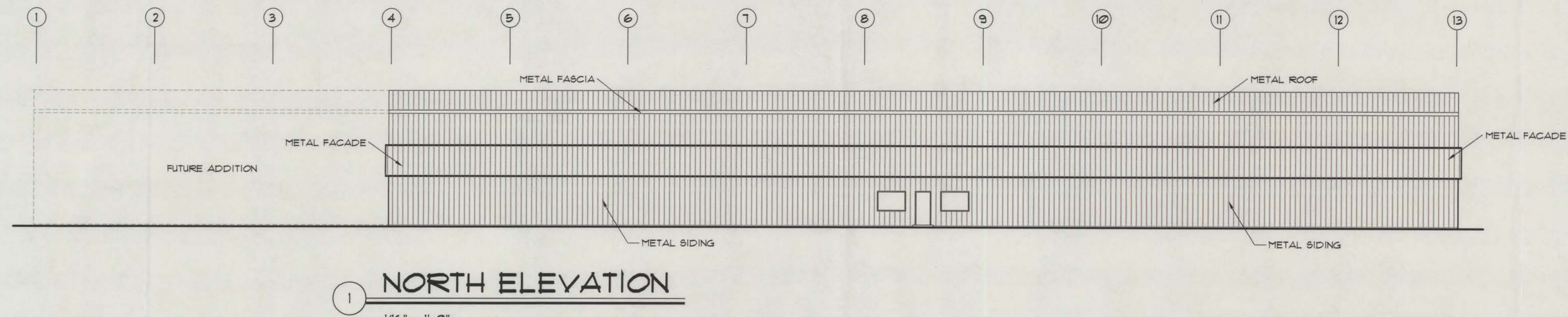
THE NELSON ARCHITECTURAL GROUP, INC.
 P.O. BOX 5039 200 EAST 11TH, SUITE B
 PINE BLUFF, ARKANSAS 71611
 PHONE 870-534-8922 FAX 870-534-3680

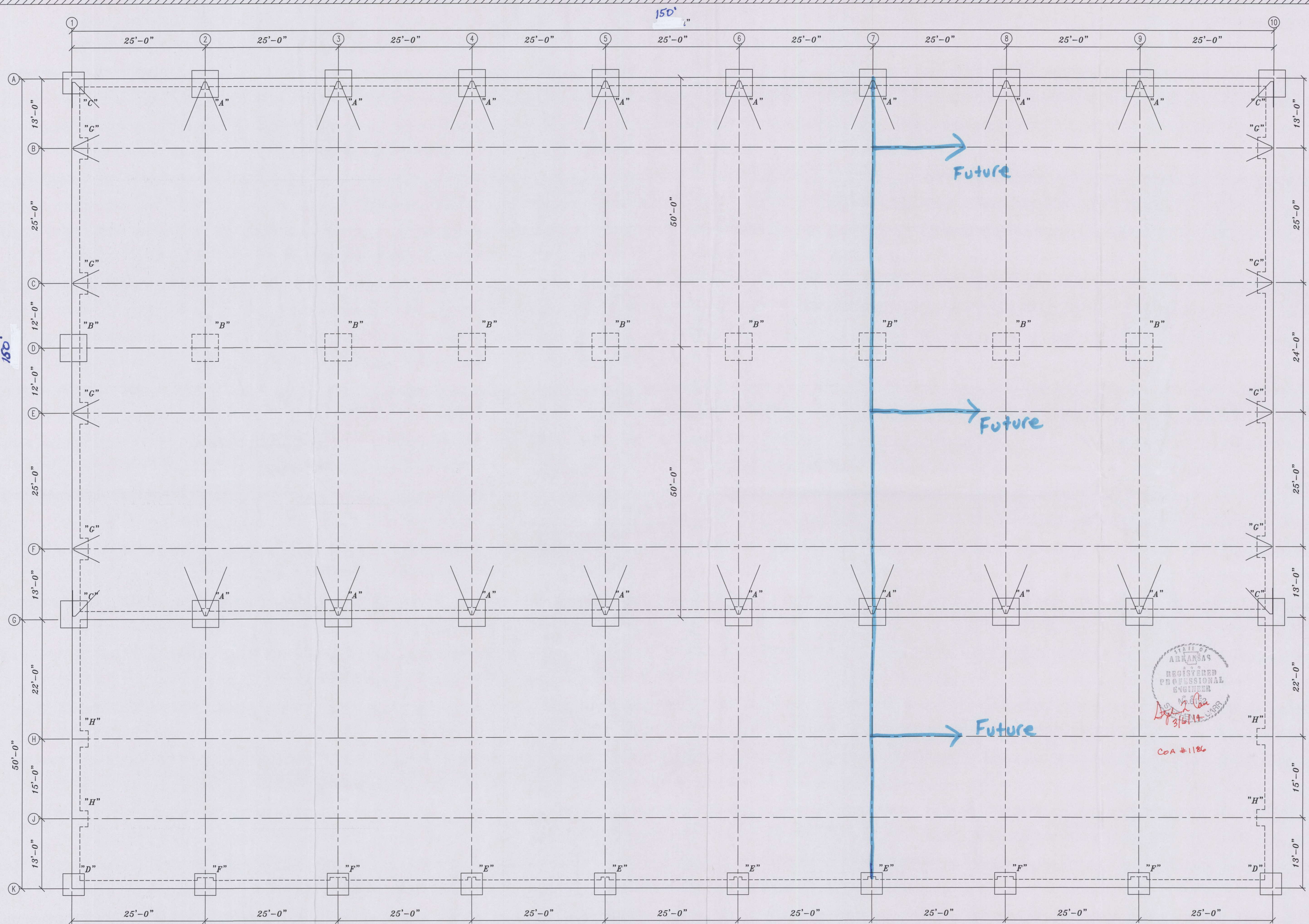
A WAREHOUSE FOR
FLEMING ELECTRIC
 BRYANT, ARKANSAS

SHEET TITLE
FLOOR PLAN
 FILE NO.
 201410-FLOOR/PLG

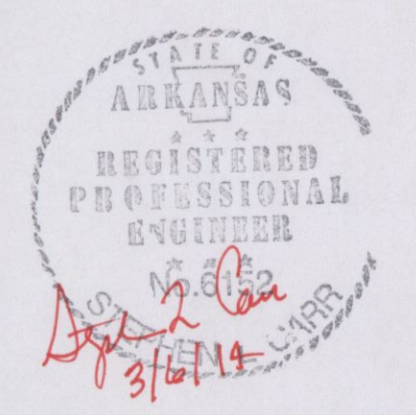
DATE
 2-25-2014
 PROJECT NO.
 2014.10

A1.1





1 FOUNDATION
 1/8" = 1'-0"

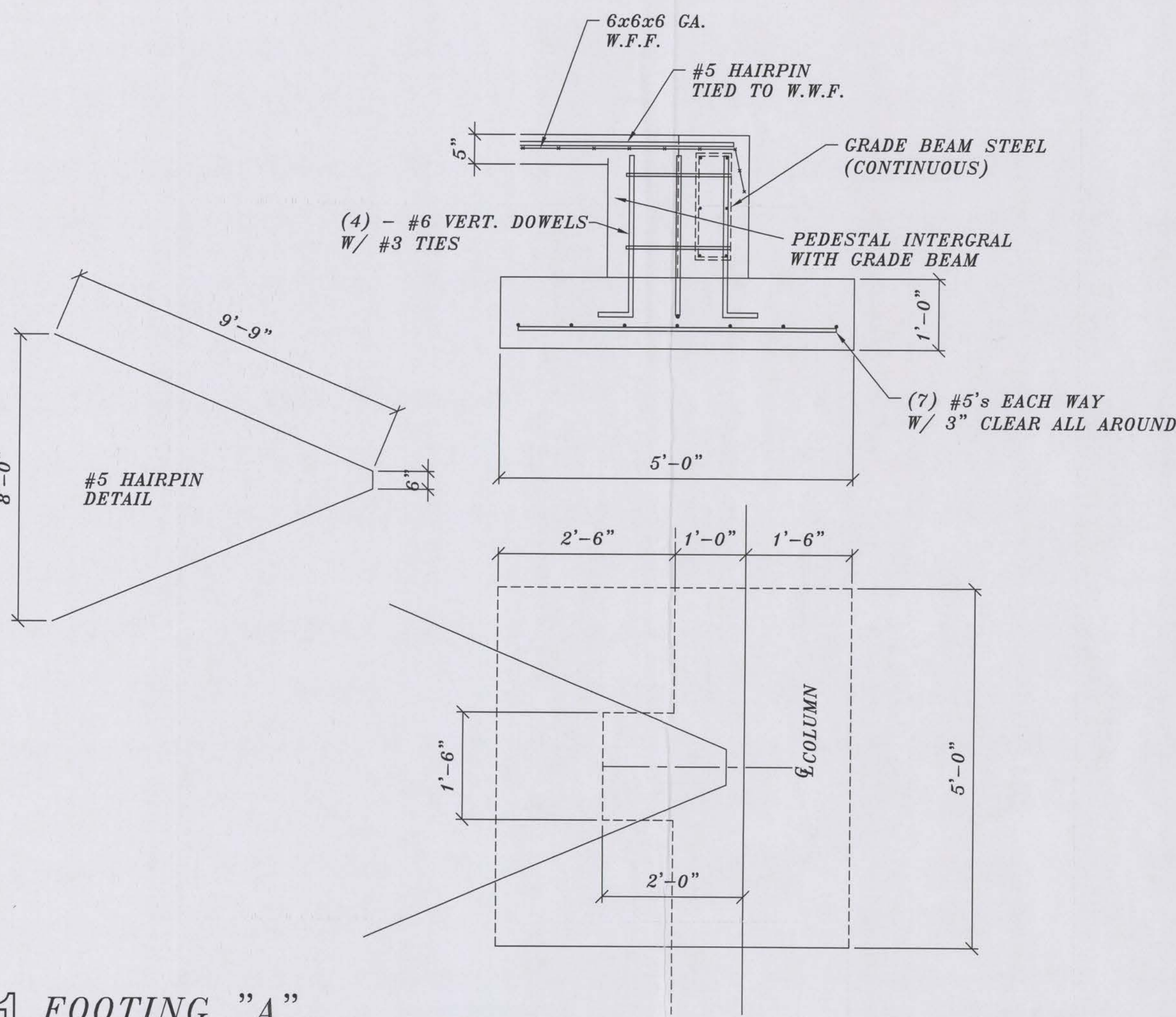


CoA #1186

FLEMING ELECTRIC
 5401 HWY. 5 NORTH
 BRYANT, ARKANSAS 72022

Carr Engineering
 Stephen L. Carr, P.E.
 7923 South Pinewood, Pine Bluff, AR 71603
 Office/Fax (870)879-0940
 Home (870)879-4487

| | |
|---------|--------------|
| DRAWN | KDM |
| CHECKED | SC |
| DATE | 28FEB14 |
| SCALE | 1/8" = 1'-0" |
| SHEET | F1 |



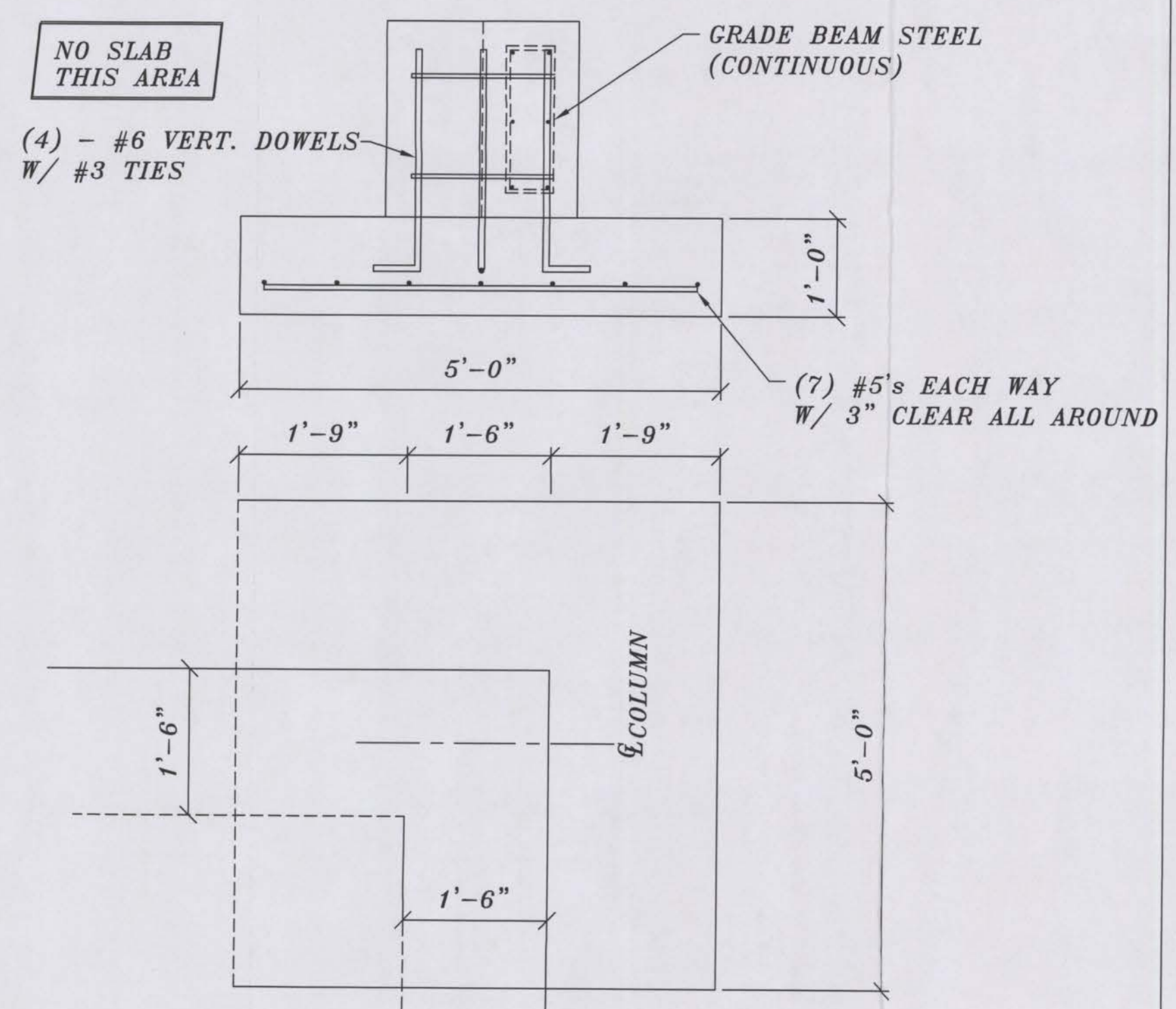
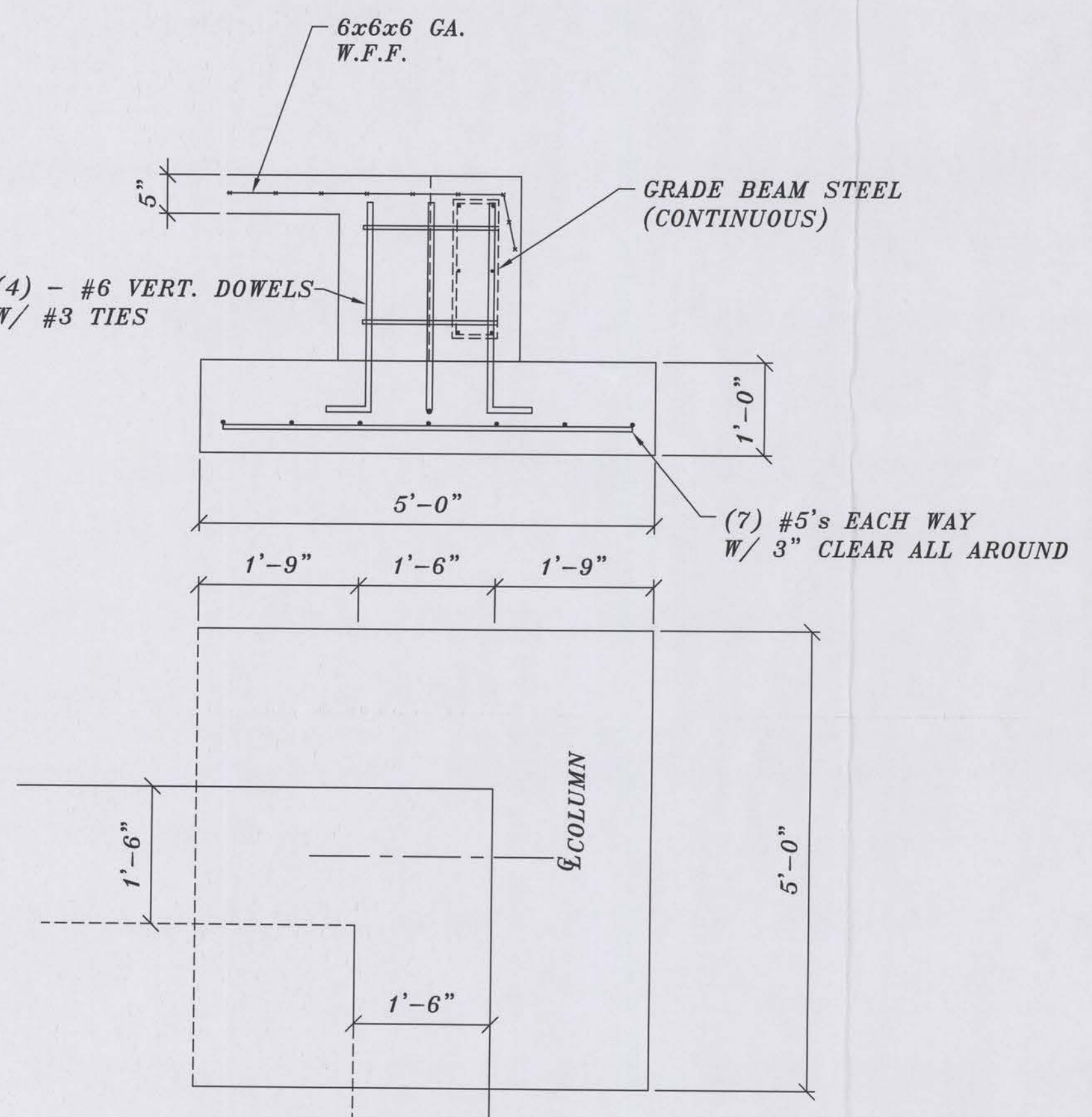
BUILDING DESIGN CRITERIA:
 BUILDING CODE: 2009 INTERNATIONAL BUILDING CODE
 BUILDING USE: STANDARD OCCUPANCY STRUCTURE
 ROOF LIVE LOAD: 20.00 psf (Reducible)
 COLLATERAL GRAVITY: 5.00 psf

WIND LOAD:
 WIND SPEED: 90.00 MPH
 THE "LOW RISE" METHOD IS USED
 WIND EXPOSURE (FACTOR): C
 WIND ENCLOSURE: ENCLOSED
 WIND IMPORTANCE FACTOR: 1.000
 BASIC WIND PRESSURE: 16.52 psf

SNOW LOAD:
 GROUND SNOW LOAD: 10.00 psf
 DESIGN SNOW (SLOPED): 6.30 psf
 EXPOSURE CATEGORY (FACTOR): 1 FULLY EXPOSED (0.90)
 SNOW IMPORTANCE: 1.00

SEISMIC LOAD:
 MAPPED SPECTRAL RESPONSE: $S_s=41.50\%g$
 MAPPED SPECTRAL RESPONSE: $S_1=14.20\%g$
 SEISMIC DESIGN CATEGORY: D
 SEISMIC IMPORTANCE: 1.000
 SOIL PROFILE TYPE: STIFF SOIL (D,4)
 BRACE SEISMIC FACTOR (C_s): 0.1250 x W (BASE SHEAR)

- GENERAL NOTES:**
- FOUNDATIONS SHALL BE BUILT ON UNDISTURBED SOIL OR PROPERLY COMPACTED FILL MATERIAL. THE AREA UNDER FOOTINGS, FOUNDATIONS, AND CONCRETE SLABS ON GRADE SHALL HAVE ALL VEGETATION, STUMPS, ROOTS, AND FOREIGN MATERIALS REMOVED PRIOR TO THEIR CONSTRUCTION. FILL MATERIAL SHALL BE FREE OF VEGETATION AND FOREIGN MATERIAL.
 - FINISH GRADE SHALL BE SLOPED AWAY FROM THE FOUNDATION FOR DRAINAGE.
 - CONCRETE SLAB TO HAVE A 28-DAY COMPRESSION STRENGTH OF $f'_c = 3000$ psi. ALL CONSTRUCTION TO BE IN ACCORDANCE WITH THE PROVISIONS OF THE AMERICAN CONCRETE INSTITUTE "BUILDING CODE REQUIREMENTS FOR REINFORCED CONCRETE". LATEST EDITION.
 - ALL REINFORCING BARS AND HAIRPINS TO CONFORM TO ASTM A615 - "SPECIFICATIONS FOR DEFORMED BILLET-STEEL BARS FOR CONCRETE REINFORCEMENT".
 $y_f = 60,000$ psi (GRADE 60).
 - CRACK CONTROL JOINTS TO BE SAW CUT 15'x15' MAX. PATTERN
 - 5" THICK SLAB W/ 6 MIL VISQUEEN UNDER LAYER
 - WELDED WIRE FABRIC (W.W.F.) TO BE 6 x 6 x 6 ga.
FLAT MATS ONLY



STATE OF ARKANSAS
 REGISTERED PROFESSIONAL ENGINEER
 No. 6152
 Stephen L. Carr
 3/6/14
 CoA #11860

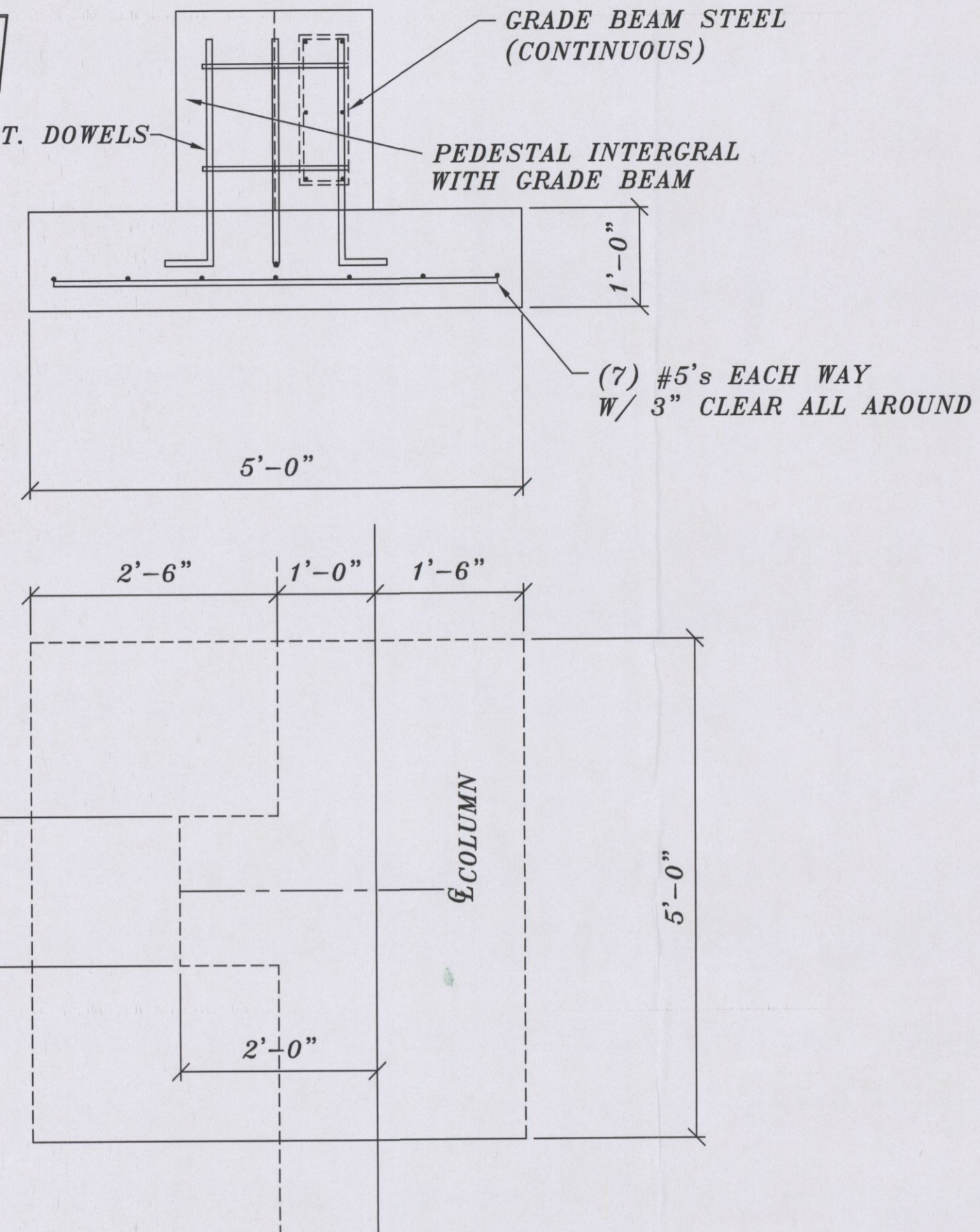
Carr Engineering
 Stephen L. Carr, P.E.
 7923 South Pinewood, Pine Bluff, AR 71603
 Office/Fax (870)879-0940
 Home (870)879-4487

FLEMING ELECTRIC
 BRYANT, ARKANSAS 72022

| | |
|---------|---------|
| DRAWN | KDM |
| CHECKED | SC |
| DATE | 28FEB14 |
| SCALE | VARIES |
| SHEET | F2 |

NO SLAB
THIS AREA

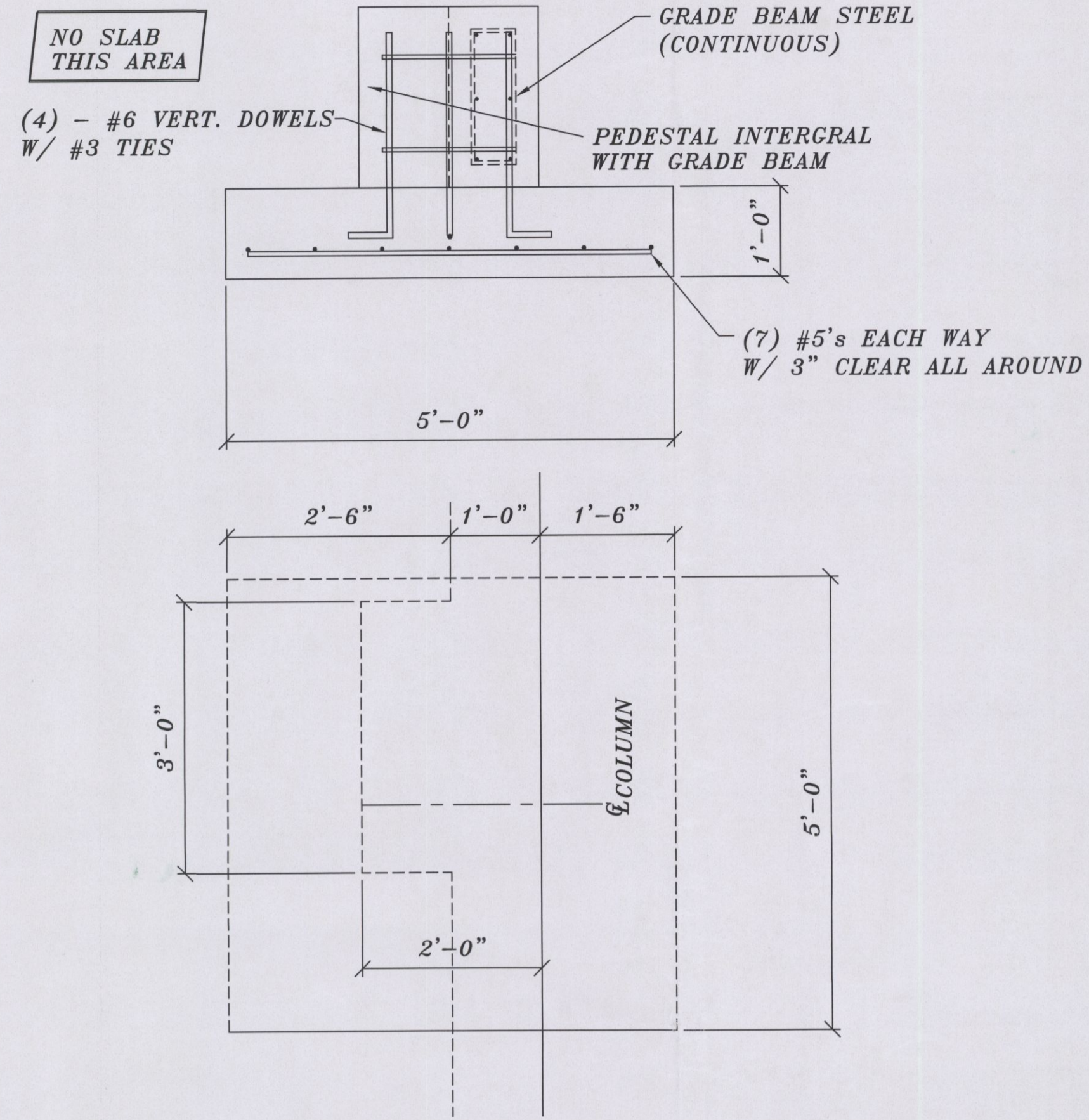
(4) - #6 VERT. DOWELS
W/ #3 TIES



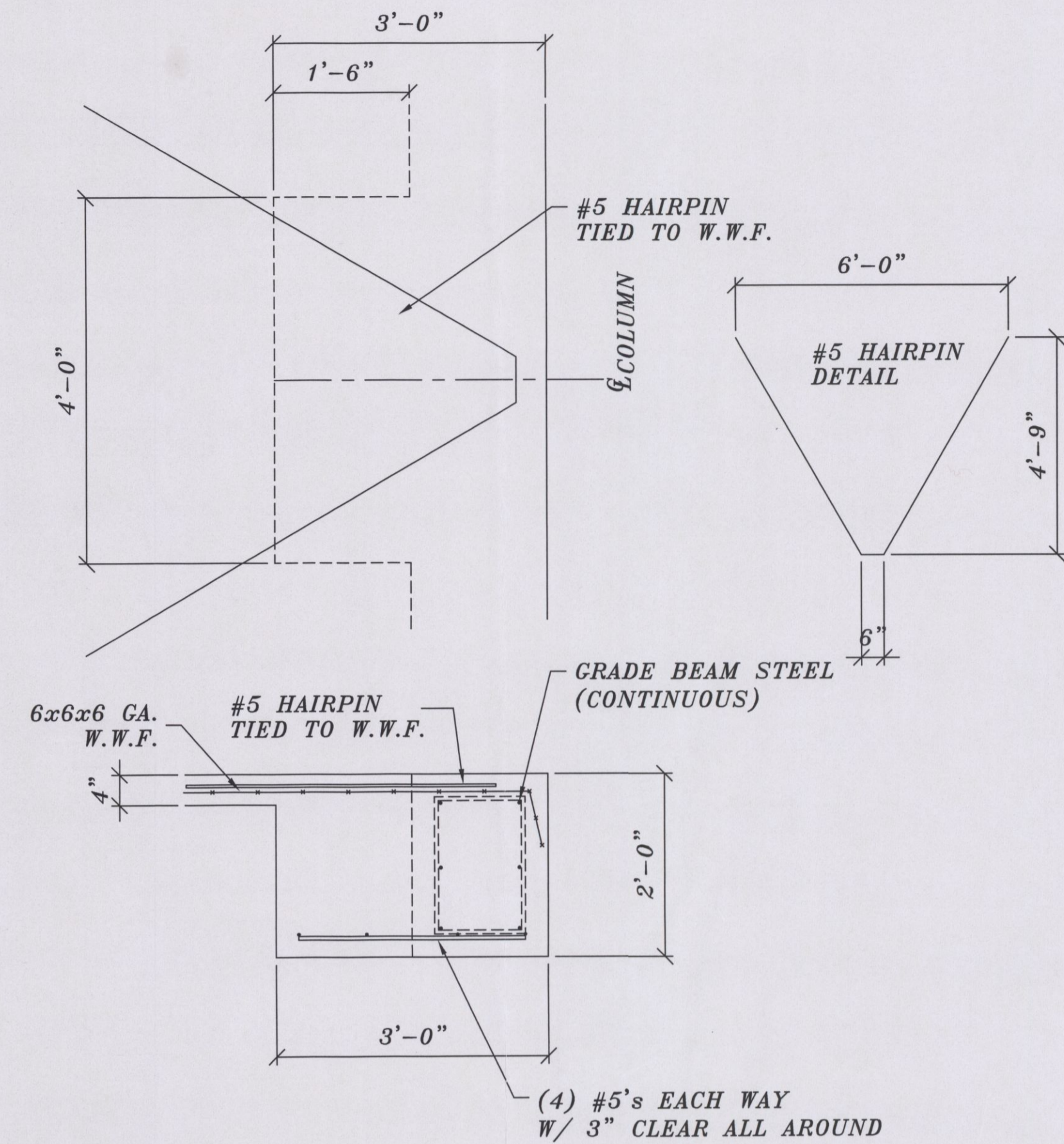
7 FOOTING "E"
3/4" = 1'-0"

NO SLAB
THIS AREA

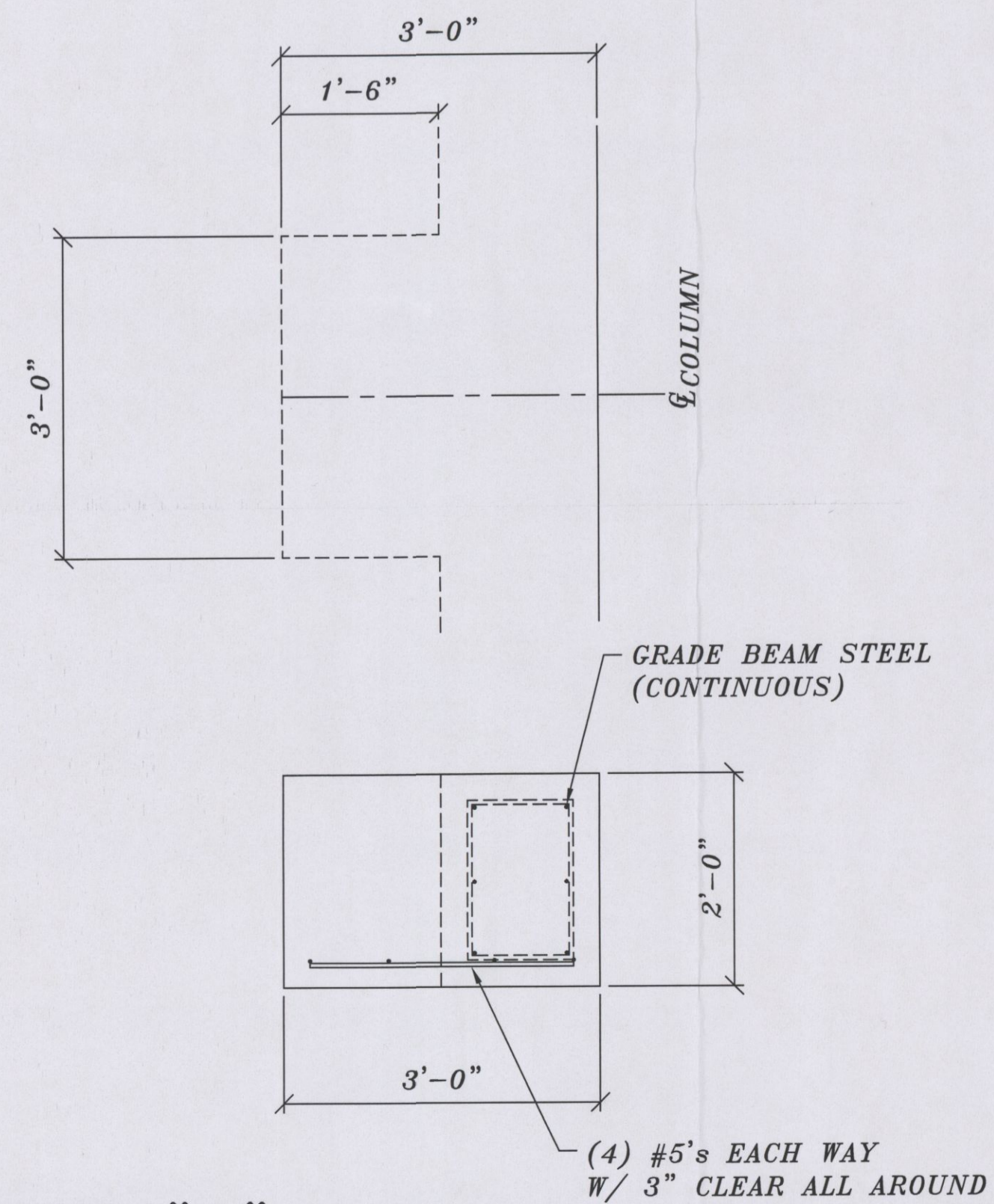
(4) - #6 VERT. DOWELS
W/ #3 TIES



8 FOOTING "F"
3/4" = 1'-0"



9 FOOTING "G"
3/4" = 1'-0"



10 FOOTING "H"
3/4" = 1'-0"

FLEMING ELECTRIC

BRYANT, ARKANSAS 72022

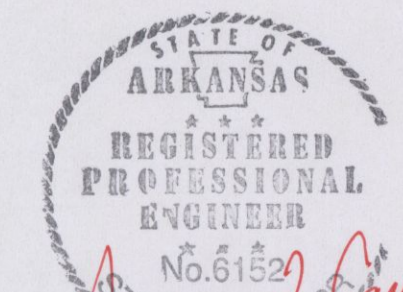
Carr Engineering

Stephen L. Carr, P.E.

7923 South Pinewood, Pine Bluff, AR 71603

Office/Fax (870)879-0940

Home (870)879-4487



3/6/14
CoA #1186

DRAWN
KDM
CHECKED
SC
DATE
28FEB14
SCALE
VARIES
SHEET

F3

Bryant Planning Commission

SMALL SCALE DEVELOPMENT COMMERCIAL BUILDING CHECKLIST

CITY OF BRYANT
210 SW 3RD STREET
BRYANT, AR 72022
501-943-0309

PC MEETING DATE: THURSDAY OF EACH WEEK
TIME: 9:00 A.M.
PLACE: ADMINISTRATION CONFERENCE ROOM-BRYANT OFFICE
COMPLEX
AGENDA DEADLINE: 5:00 P.M. FRIDAY PRIOR TO SCHEDULED MEETING DATE

REQUIREMENTS FOR SUBMISSION

1. COMPLETED CHECKLIST (SUBDIVISION OR BUILDING)
2. ADA/ABA FORM COMPLETED
3. TWO FULL SETS OF BUILDING PLANS
4. ~~4~~ ⁸ FOLDED COPIES OF SITE PLAN (MINIMUM SIZE 17" X 34") THAT INCLUDES THE FOLLOWING:
 - A. VICINITY MAP
 - B. LEGAL DESCRIPTION
 - C. LANDSCAPING PLAN
5. ~~2~~ ⁸ FOLDED COPIES OF FLOOR PLAN
6. ~~2~~ ⁸ COPIES OF FRONT AND REAR BUILDING ELEVATIONS
7. A CD IN .PDF FORMAT
8. COPY OF ADEQ STORMWATER POLLUTION PREVENTION PLAN FOR PROPERTY PARCEL CONTAINING ONE ACRE OR LARGER. *less than 1 acre N/A*
9. 2 COPIES OF STORMWATER DETENTION PLAN
10. \$250.00 FOR STORMWATER DETENTION AND DRAINAGE PLAN REVIEW

ALL REQUIREMENTS LISTED ABOVE MUST BE COMPLETED AND ATTACHED BEFORE SUBMITTING APPLICATION TO BE PLACED ON THE PLANNING COMMISSION AGENDA.

NOTE: WHEN MAKING CHANGES TO AN APPROVED SITE PLAN, A REVISED SITE PLAN MUST BE SUBMITTED TO THE BRYANT PLANNING COMMISSION FOR APPROVAL. THIS MUST BE DONE PRIOR TO IMPLEMENTATION. FAILURE TO COMPLY WILL RESULT IN PENALTIES/FINES BEING IMPOSED IN ACCORDANCE WITH CITY ORDINANCES.

I HAVE COMPLIED WITH THE REQUIREMENTS LISTED ABOVE AND HAVE CHECKED ALL OF THE BOXES ON THE CHECKLIST WHICH APPLY TO THIS PROJECT SUBMITTAL.


SIGNATURE

12-21-16
DATE

City of Bryant Commercial Building Checklist

Name of Development: FULKS FAMILY DENTISTRY
Site Location: 3305 HIGHWAY 5 Current zoning: C-2
Owner: DR CLINT FULKS Phone: 501-778-9222

I. BASIC INFORMATION NEEDED ON THE SITE PLAN

- ▲ 1. Name of Development
- ▲ 2. Current zoning
- ▲ 3. Name and Address of owner of Record
- ▲ 4. Name and address of the architect, landscape architect, engineer, surveyor, or other person involved in the preparation of the plan
- ▲ 5. Date of preparation of the plan
- ▲ 6. Vicinity map locating streets, highways, section lines, railroad, schools, & parks within 1/2 mile
- ▲ 7. Legal description of the property with exact boundary lines
- ▲ 8. North arrow & Scale
- ▲ 9. Identification of any land areas within the 100 year floodplain and within the 100 year floodway
- ▲ 10. Lot area in square feet
- ▲ 11. Show scale (not less than 1" = 100') (paper size minimum 17" X 34")
- ▲ 12. Existing streams, drainage channels, and other bodies of water
- ▲ 13. Drainage easements for stormwater run-off and detention shown & labeled
- ▲ 14. Location and name of existing streets
- ▲ 15. Show source of water supply
- ▲ 16. Show location of waste water connection to municipal system & sanitary sewer layout
- ▲ 17. Fire Hydrant placement
- ▲ 18. Proposed location of buildings and other structures, parking areas, drives, loading areas, service areas, alleys, walks, screening, and public streets
- ▲ 19. Sufficient dimensions to indicate relationship between buildings, property lines, parking areas and other elements of the plan
- ▲ 20. Extent and character of proposed landscaping. Common and/or Botanical plant names and sizes of new vegetation must be clearly indicated.
- ▲ 21. Location, massing and pattern of existing vegetation to be retained
- ▲ 22. Existing structures on the site
- ▲ 23. Pedestrian and vehicular access points, sidewalks, crosswalks, etc.
- ▲ 24. Typical building elevations depicting the style, size and exterior construction materials of the buildings proposed. Where several building types are proposed on the plan, such as apartments and commercial buildings, a separate sketch shall be prepared for each type. The elevations shall be drawn at a minimum scale of 1/16" to a foot and must show adjoining context.
- ▲ 25. Any variance approvals.

II. ADDITIONAL INFORMATION NEEDED, BUT NOT ON THE SITE PLAN

COMMERCIAL BUILDING WORKSHEET

| | Yes | No |
|--|-----|----|
| Site is compatible with Master Street Plan | X | |
| Proposed improvement is within building line setbacks Front <u>50</u> ft. Side <u>0</u> ft. CNR Side <u>0</u> ft. Back <u>0</u> ft. | X | |
| Parking requirements can be satisfied Floor Space <u>5498</u> sq. ft. divided by 300 = <u>18</u> (no. of parking spaces required) | X | |
| Improvement is outside 100 year flood plain (if answer is no - Provide 404 Permit for site) | X | |
| Lowest building floor level and all mechanical equipment are above FEMA 100-year flood elevation | X | |
| Will there be a dumpster located on the site? <i>(FUTURE)</i> | | X |
| Will there be a construction site office? | X | |
| Have you made "One-Call"? | | X |
| Structure and site complies with ADA (Americans with Disability Act) and ABA (Architectural Barriers Act) Accessibility Guidelines | X | |
| Design complies with Arkansas Plumbing Code and National Electric Code requirements | X | |
| Foundation and structure meet earthquake requirements for Zone 1. | X | |
| Structure meets Arkansas Energy Code for specified use. | X | |
| Complies with Arkansas Fire Prevention Code | X | |
| Complies with International Code Council regulations. | X | |
| Will a Site Clearance Permit be required? (City Ordinance 2002-03) | | X |
| Are you granted any variances by the Board of Adjustment? | | X |
| If you have been granted a variance please explain in detail: | | |
| | | |
| | | |

III. LANDSCAPING COMPLIANCE WITH REQUIREMENTS

| | YES | NO |
|---|-----|-------|
| No planting within 5 feet of a fire hydrant | X | _____ |
| Spacing will be 40' between trees | X | _____ |
| Tree must be a minimum 3" in diameter at the base and 12' + tall | X | _____ |
| Existing trees meeting the minimum size can be counted to meet above criteria | X | _____ |
| No trees can be planted within 30 feet of a property corner or driveway | X | _____ |
| Shrubs along street right-of-way lines cannot exceed 30 inches in height | X | _____ |

IV. SITE COVERAGE COMPLIANCE WITH REQUIREMENTS

(FOR YOUR CONVENIENCE WE HAVE LISTED THE THREE COMMERCIAL ZONING SITE COVERAGE REQUIREMENTS - CHOOSE THE ZONING FOR THIS PROJECT AND COMPLETE ONLY THAT SECTION)

| | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. C-1 Zoning - Neighborhood Commercial | | |
| Lot area: minimum of 2,500 square feet; maximum 16,000 square feet | _____ | _____ |
| Front Yard: none required | _____ | _____ |
| Side Yard: minimum of 5 feet each side | _____ | _____ |
| Rear Yard: minimum of 55 feet | _____ | _____ |
| Maximum lot coverage of 70% of the total area of the site for all principal, accessory buildings, parking lots, sidewalks, private streets, or drives. | _____ | _____ |
| Parking: one space per each 200 sq. ft. of commercial use. | _____ | _____ |
| Loading areas: physically separated from all streets with 10 ft grassy area | _____ | _____ |
| When abuts a residential district, a minimum 6' high wood, rock, or masonry fence is required with a landscape screen | _____ | _____ |
| 2. C-2 Zoning - Lots fronting along roadways designated as Interstate 30 and frontage roads, State Highway 5 and 183 | | |
| Front Yard: not less than 50 feet from front property line | <u>X</u> | _____ |
| Side Yard: not required, except where they abut a street or a residential lot line then a minimum of 25 feet is required | <u>X</u> | _____ |
| Rear Yard: minimum of 15 feet, except where they abut residential area then a minimum of 55 feet is required | <u>X</u> | _____ |
| A maximum lot coverage of 35% of the total area of the site for all principal and accessory buildings 19.69% COVERAGE | <u>X</u> | _____ |
| Parking: one space per each 300 sq. ft. of occupied space | <u>X</u> | _____ |
| When abuts a residential district, a minimum 6' high wood, rock, or masonry fence is required with a landscape screen | <u>X</u> | _____ |
| 3. C-2 Zoning - Lots fronting along roadways designated as interior local | | |
| Front Yard: none required | _____ | _____ |
| Side Yard: not required, except where they abut a street or a residential lot line then a minimum of 25 percent of lot dimension | _____ | _____ |
| Rear Yard: minimum of 15 feet, except where they abut residential area then a minimum of 55 feet is required | _____ | _____ |
| A maximum lot coverage of 85% of the total area of the site for all principal, accessory buildings and parking | _____ | _____ |
| Parking: one space per each 300 sq. ft. of occupied space | _____ | _____ |
| When abuts a residential district, a minimum 6' high wood, rock, or masonry fence is required with a landscape screen | _____ | _____ |

V. SITE PLAN ATTACHMENTS

(APPLICATION WILL NOT BE ACCEPTED UNTIL ALL ATTACHMENT REQUIREMENTS ARE MET)

- ▲ 26. Letter to Planning Commission stating your request
- ▲ 27. Completed Checklist
- ▲ 28. Completed ADA/ABA Form
- ▲ 29. Two full sets of Building Plans
- ▲ 30. 20 copies of Site Plan (folded to no larger than 8 1/2 X 14 size) that includes vicinity map and landscaping plan (minimum size 17" X 34" paper)
- ▲ 31. 20 copies of Landscaping Plan (folded to no larger than 8 1/2 X 14 size)
- ▲ 32. 20 copies of building floor plan (folded to no larger than 8 1/2 X 14 size)
- ▲ 33. Copy of Stormwater Detention approval
- ▲ 34. Copy of ADEQ Stormwater Pollution Prevention Plan for property containing one acre or larger.
- ▲ 35. IBM compatible diskette or CD with data in PDF format.
- ▲ 36. Receipt for \$250.00 for Stormwater Detention and Drainage Plan review

I CERTIFY that the design of FULKS DENTAL CLINIC in the City of Bryant, Arkansas complies with the above regulations, laws and codes.

DR. CUNT FULKS
Owner
1200 FERGUSON DR. #4
Mailing Address
BENTON, AR 72015
City

Tim Yewington
RPPI ARCHITECTS TIM YEWINGTON
Engineer/Architect
501-372-0272
Phone #
03 JAN 17
Date

CITY USE

Action Taken:

Special Conditions:

| | | | |
|----------------|------------|--------------|-----------------|
| Permit Issued: | Date _____ | Sq.Ft. _____ | Amount \$ _____ |
|----------------|------------|--------------|-----------------|

| | |
|---|------------------|
| Construction Completed Certified For Occupancy: | Date: _____ |
| | Inspector: _____ |

Permit No. _____

BUILDING PERMIT

ADA/ABA ACCESSIBILITY STANDARDS

The *Americans with Disability Act* and *Architectural Barriers Act* Accessibility Guidelines were prepared by the U.S. Access Board and mandated by the U. S. Department of Justice regulations implementing Title III as the official ADA/ABA accessibility guidelines. **All new construction, remodeling, and modifications must conform to these building standards** for places of public accommodation and commercial facilities. Residential is exempt.

The ADA/ABA accessibility guidelines contain general design standards for building and site elements, such as accessible entrances and routes, ramps, parking spaces, stairs, elevators, restrooms, signage, etc. Also included are specific standards for restaurants, medical care facilities, libraries and transportation facilities and vehicles, and places of lodging.

The guidelines also include "scoping" requirements that outline the necessary features or appropriate quantity for achieving ready access. For example, at least 50 percent of all public entrances to buildings must be accessible with an accessible path of travel. In public restrooms, at least one bathroom stall must be accessible unless there are more than six stalls, in which case the number increases.

I hereby certify that I have read and examined the above notice and will comply with all guidelines of the ADA Accessibility Guidelines. I further understand that a copy of the ADA/ABA Regulations are available for inspection during business hours of City Hall or I may obtain a copy by writing:

The Access Board
1331 F Street, NW, Suite 1000
Washington, DC 20004-1111
(202) 272-0080 (v) (202) 272-0082 (TTY) (202) 272-0081 (fax)
(800) 872-2253 (v) (800) 993-2822 (TTY)
email: info@access-board.gov

Signature of Contractor
or Authorized Agent



Date 12-21-16

Signature of Owner
(if owner-builder)

Date _____

Application of Permit Approved: _____

Date _____

Commission - Chairman

Bryant Water & Sewer Department

GREASE TRAP STANDARDS

The City of Bryant requires all commercial buildings comply with plumbing codes found in the Arkansas State Plumbing Code, Latest Edition. All new construction, remodeling, and modifications must conform to these plumbing standards for places of public accommodation and commercial facilities. These guidelines contain general design standards for construction and site elements relating to plumbing.

As of 7/27/04, the Bryant Sewer & Water Commission requires stringent specification standards for commercial or public businesses that involve any food preparation on the premise. The new standard requires calculations, and associated data to be submitted to the Bryant Water Utilities General Manager concurrent with the proposed building plumbing plans along with a grease trap calculation form. Building Permits will not be issued until this form has been received and approved by the Bryant Water Utilities General Manager.

All new buildings or strip centers containing sections designated for commercial enterprise are encouraged to provide a stub-out for a separate waste line for future grease interceptor installation. The owner of a new strip center shall consider suitable physical property space and sewer gradient that will be conducive for the installation of an exterior, in-ground grease interceptor(s) for any flex space contained within the strip center. Physical Property Restrictions and sewer gradient shall not be a defense for failure to install an exterior, in-ground grease interceptor.

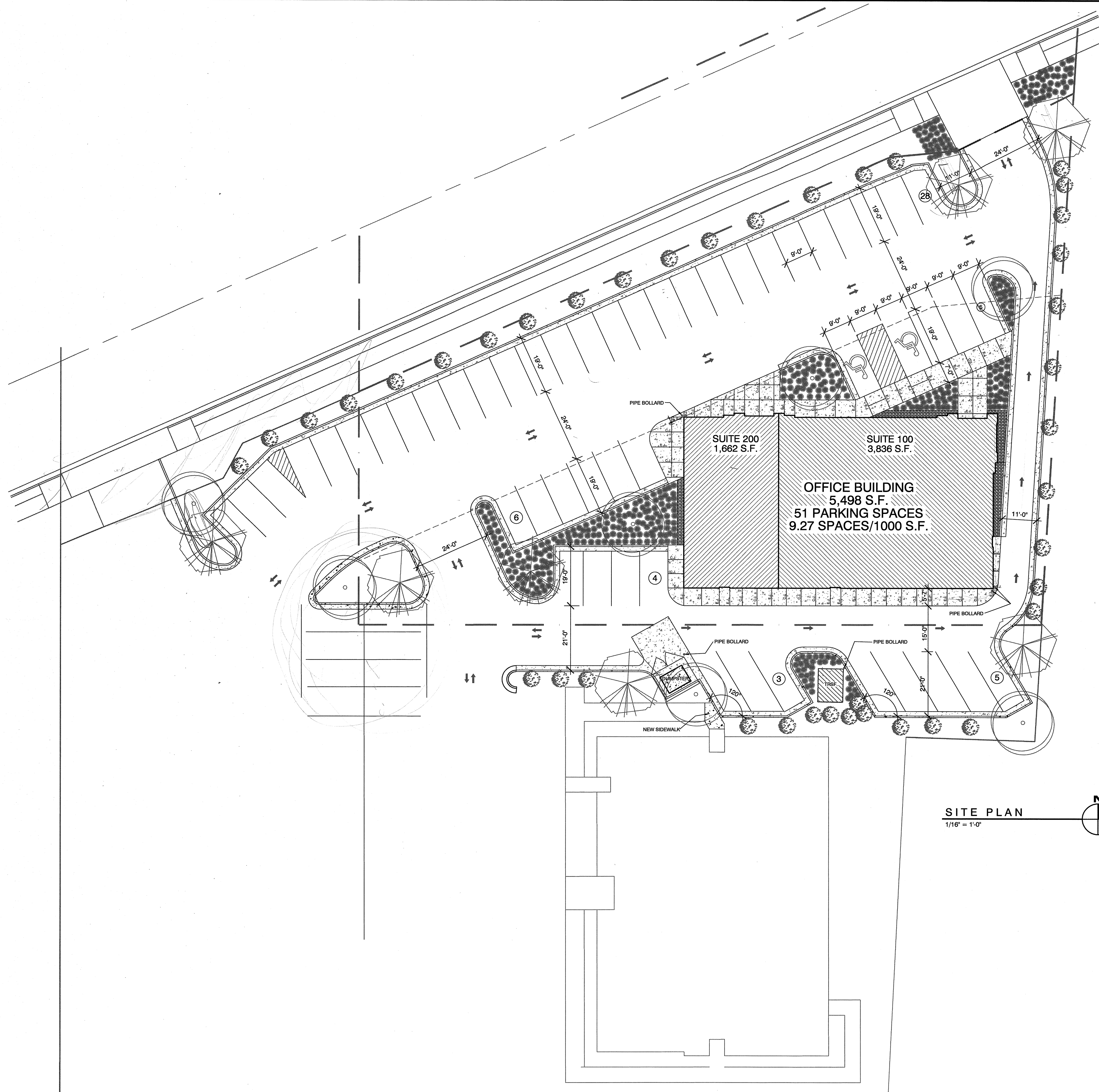
I hereby certify that I have read and examined the above notice and will comply with all guidelines of the City of Bryant Water & Sewer Department. I further understand that copies of the Grease Interceptor Design and Structural Criteria regulations will be available from the Bryant Water/Wastewater Plant (501-847-8083) during business hours.

Project Name Dr. Fulk's Dentistry

Signature of Contractor or Authorized Agent [Signature] Date 12-21-16

Signature of Owner (if owner-builder) _____ Date _____

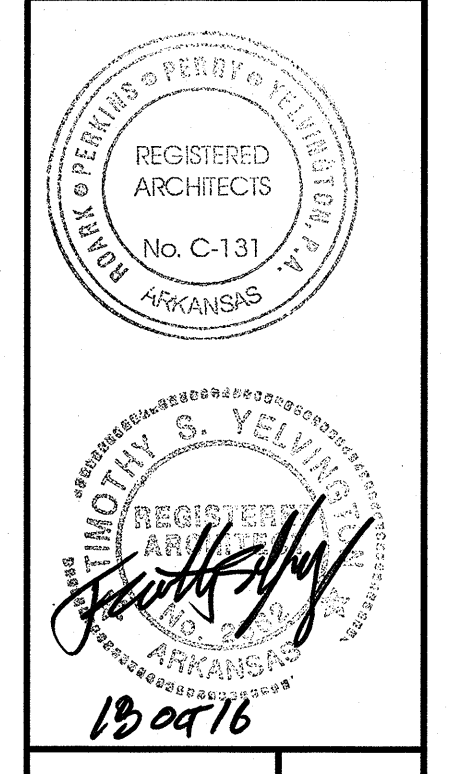
Calculations Approved: _____ Date _____
Bryant Water Utilities General Manager



SITE PLAN
1/16" = 1'-0"

ROARK PERKINS PERRY YELVINGTON
ARCHITECTURE • INTERIOR DESIGN
1111 S. GARDEN STREET, SUITE 100
BRYANT, ARKANSAS 72215
(501) 372-6272
WWW.RPPYARCHITECTS.COM

Dental Clinic & Shell Building for Dr. Clint Fulks
Highway 5 Bryant, Arkansas



| REVISIONS | DATE |
|-----------|------|
| | |
| | |
| | |

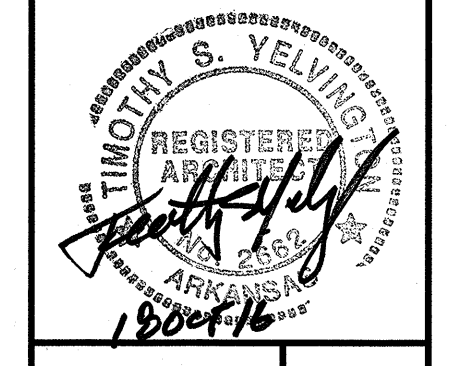
ARCHITECTURAL
SITE PLAN



| | |
|------------|---------|
| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A1.0 | 15 |
| SHEET | OF |

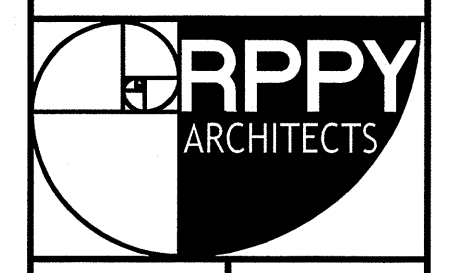
DRAWINGS, WRITTEN MATERIAL, AND DESIGN CONCEPTS SHALL NOT BE USED OR REPRODUCED IN WHOLE OR PART IN ANY FORM WITHOUT PRIOR CONSENT OF ROARK PERKINS PERRY YELVINGTON ARCHITECTS. DO NOT SCALE DRAWINGS. USE GIVEN DIMENSIONS ONLY. IF NOT SHOWN, VERIFY DIMENSIONS WITH THE ARCHITECT. CONTRACTOR SHALL CHECK AND VERIFY ALL DIMENSIONS AND CONDITIONS AT JOB SITE.

Dental Clinic & Shell Building for
Dr. Clint Fulks
 Highway 5 Bryant, Arkansas



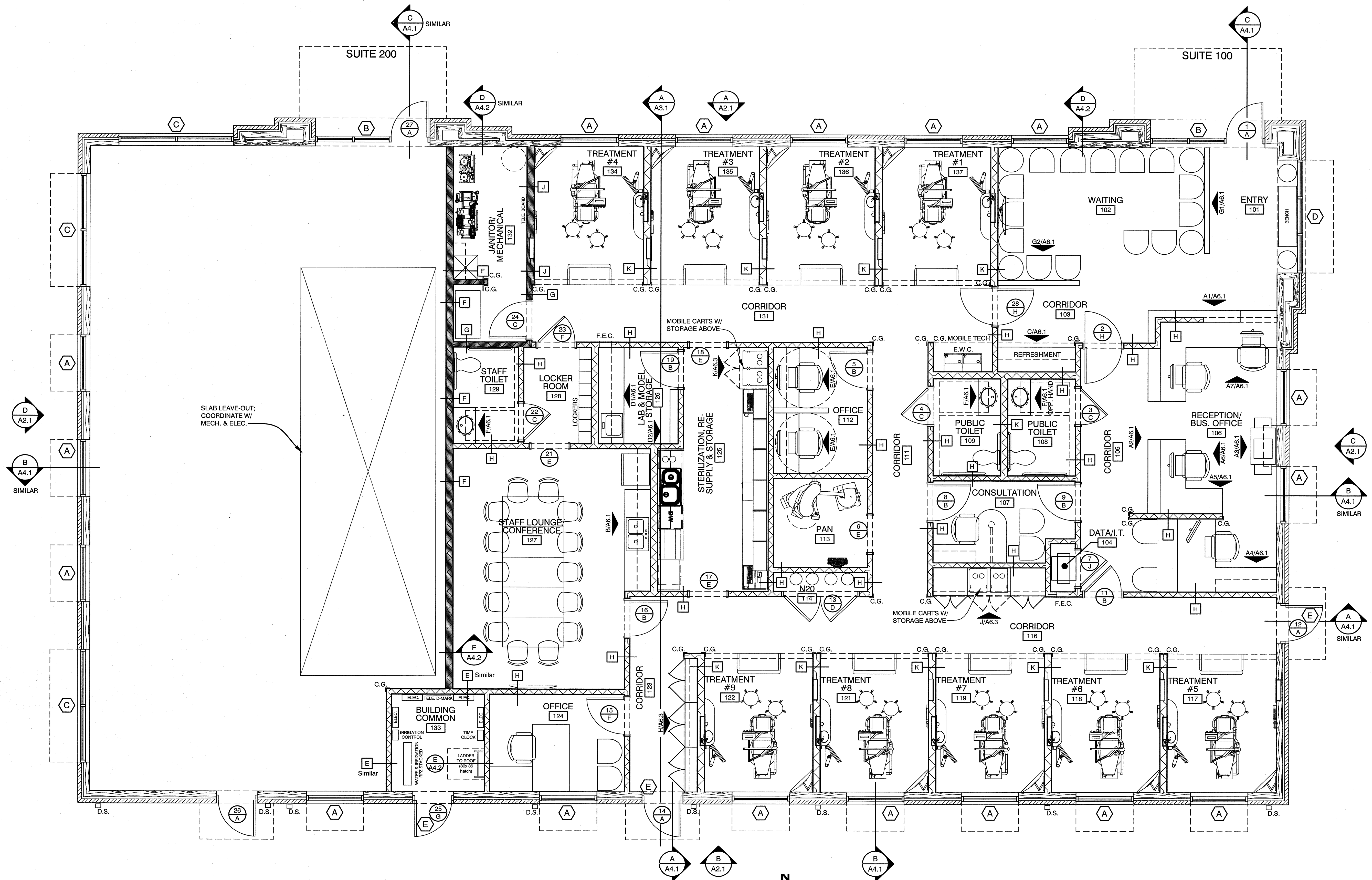
| REVISIONS | DATE |
|-----------|------|
| | |

FLOOR PLAN



| | |
|------------|---------|
| 10-13-2016 | 1549 |
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| A1.1 | 15 |
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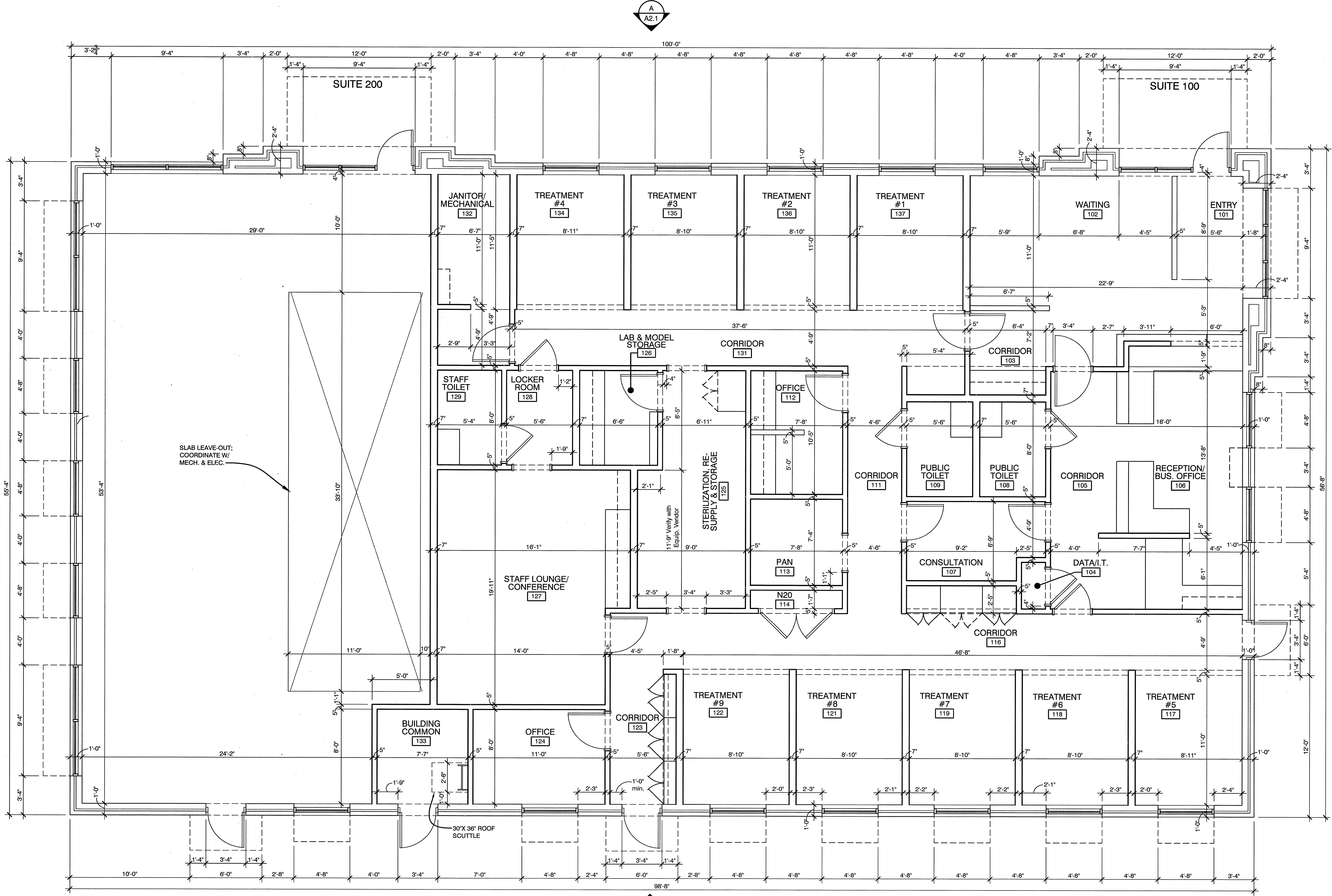


- LEGEND**
- = Metal Stud Partition
 - = Sound Wall - See Sections F and G on A4.2
 - = Room name
= Room number
 - = Elevation or Section
= Drawing number
 - = Door number
= Door Type (Drawing A5.1)
 - = Window Type (Drawing A5.1)
 - = Interior Wall Type (Drawing A4.2)
 - = Millwork Elevation and Drawing Number
 - F.E.C. = Fire Extinguisher Cabinet
 - E.W.C. = Electric Water Cooler
 - C.G. = Corner Guard
 - D.S. = Down Spout
 - EJ = Expansion Joint - See A1.0
 - CJ = Control Joint - See A1.0
 - O.F.C.I. = Owner Furnished Contractor Installed
 - M.E.J. = Masonry Expansion Joint (see Elevations A2.1)

FLOOR PLAN
 1/4" = 1'-0"

SUITE 100: 3,781 S.F.
 SUITE 200: 1,638 S.F.
 BLDG COMMON: 79 S.F.
 TOTAL: 5,498 S.F.

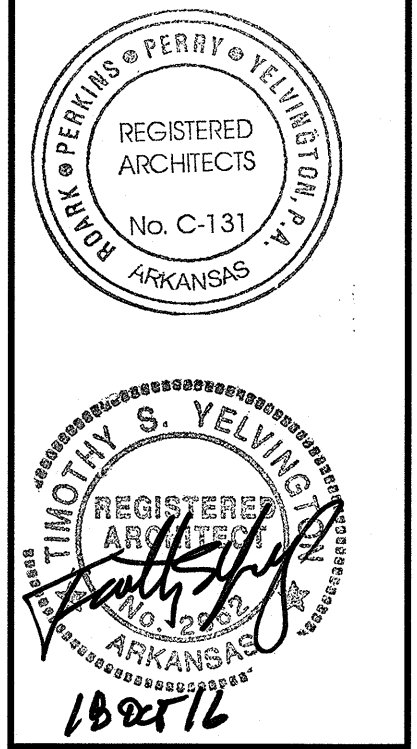
SLAB LEAVE-OUT;
 COORDINATE W/
 MECH. & ELEC.



DIMENSION PLAN
 1/4" = 1'-0" 5,498 SQ. FT.

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Dental Clinic & Shell Building for Dr. Clint Fuiks
 Highway 5 Bryant, Arkansas



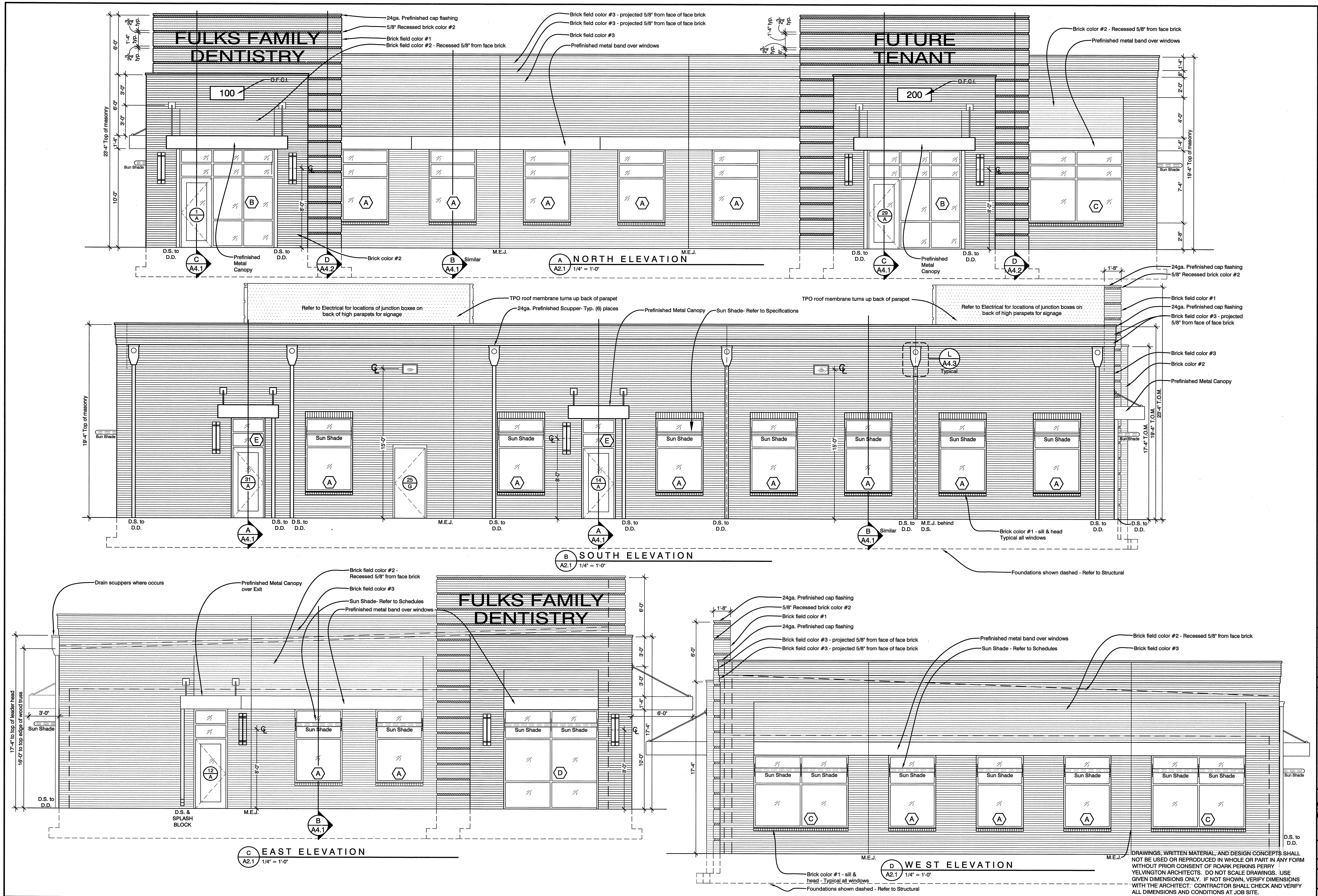
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DIMENSION PLAN



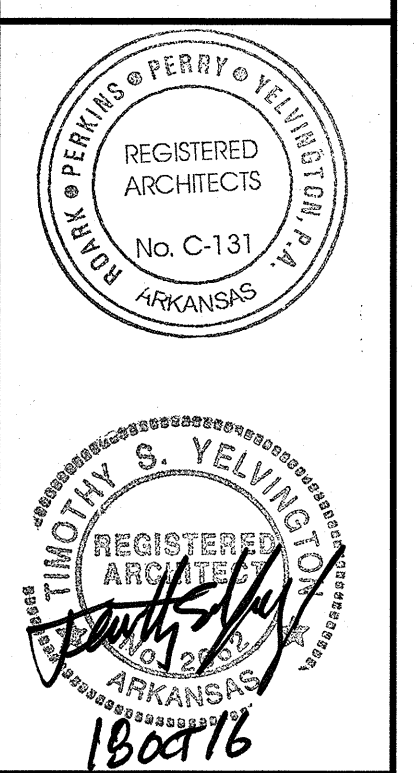
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| 10-13-2016 | 1549 |
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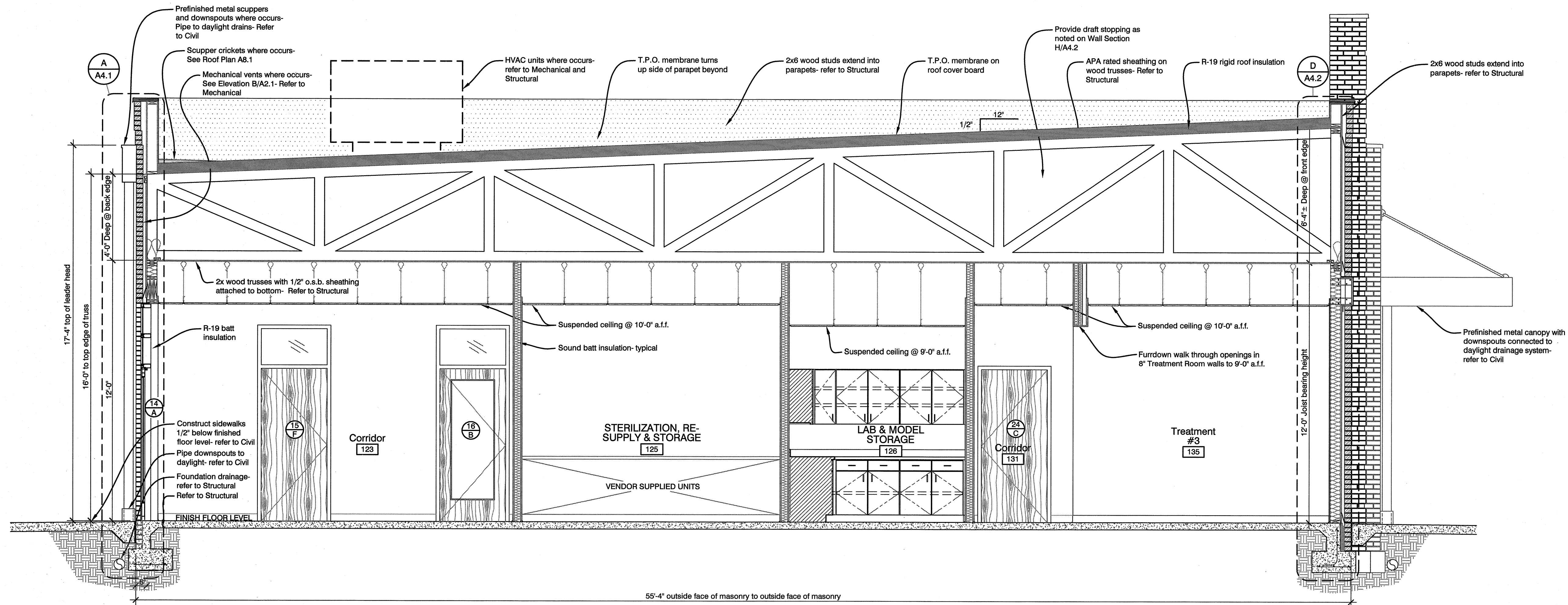
Dental Clinic & Shell Building for
Dr. Clint Fulks
 Highway 5 Bryant, Arkansas



| REVISIONS | DATE |
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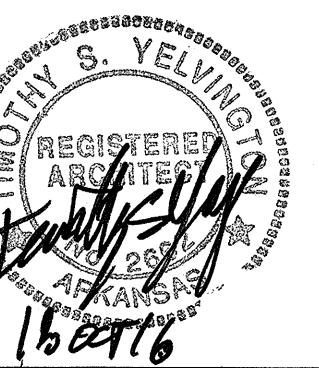
| ELEVATIONS | |
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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A2.1 | 15 |
| SHEET | OF |

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A BUILDING SECTION
A3.1 3/8" = 1'-0"

Dental Clinic & Shell Building for Dr. Clint Fulks
Highway 5 Bryant, Arkansas



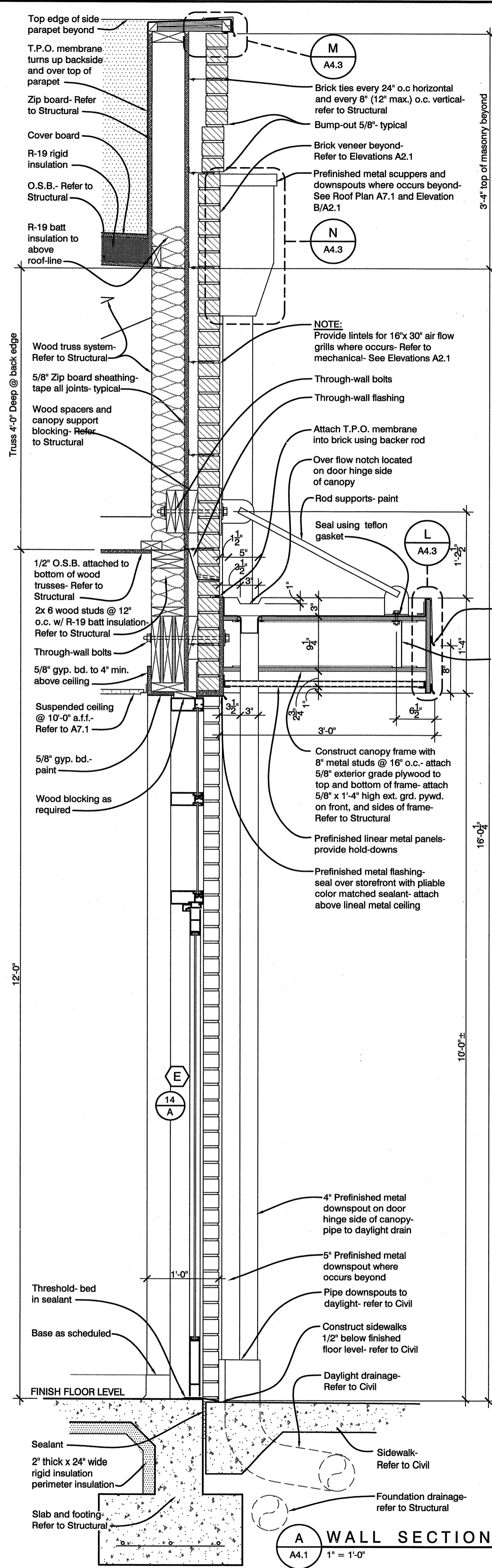
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BUILDING SECTION

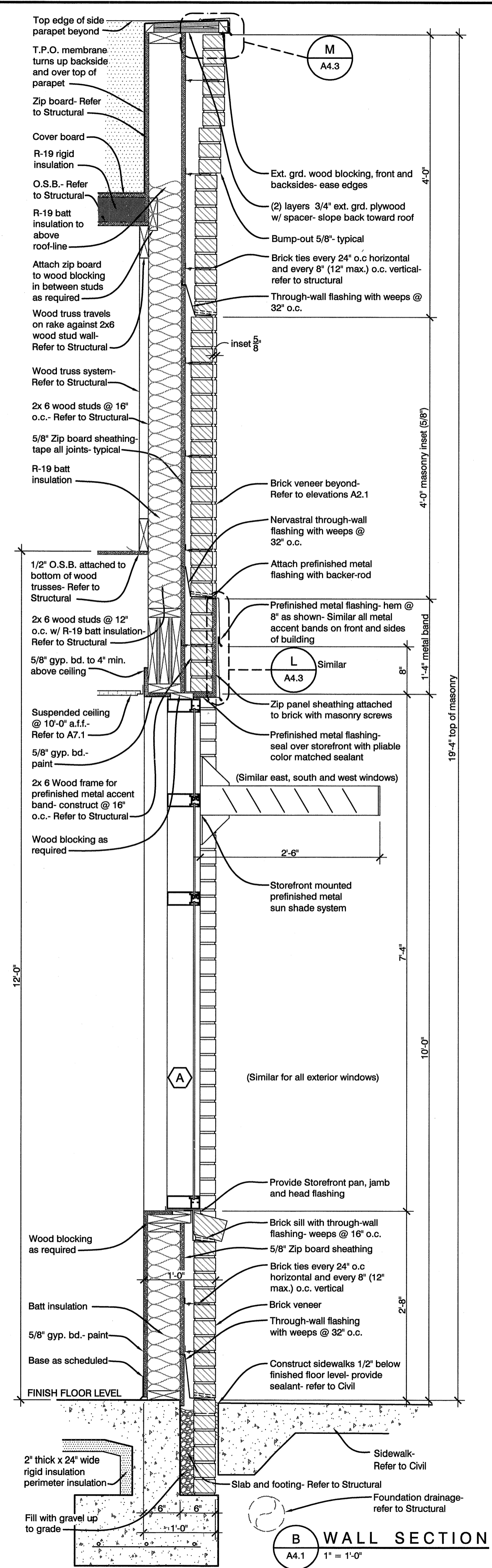


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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A3.1 | 15 |
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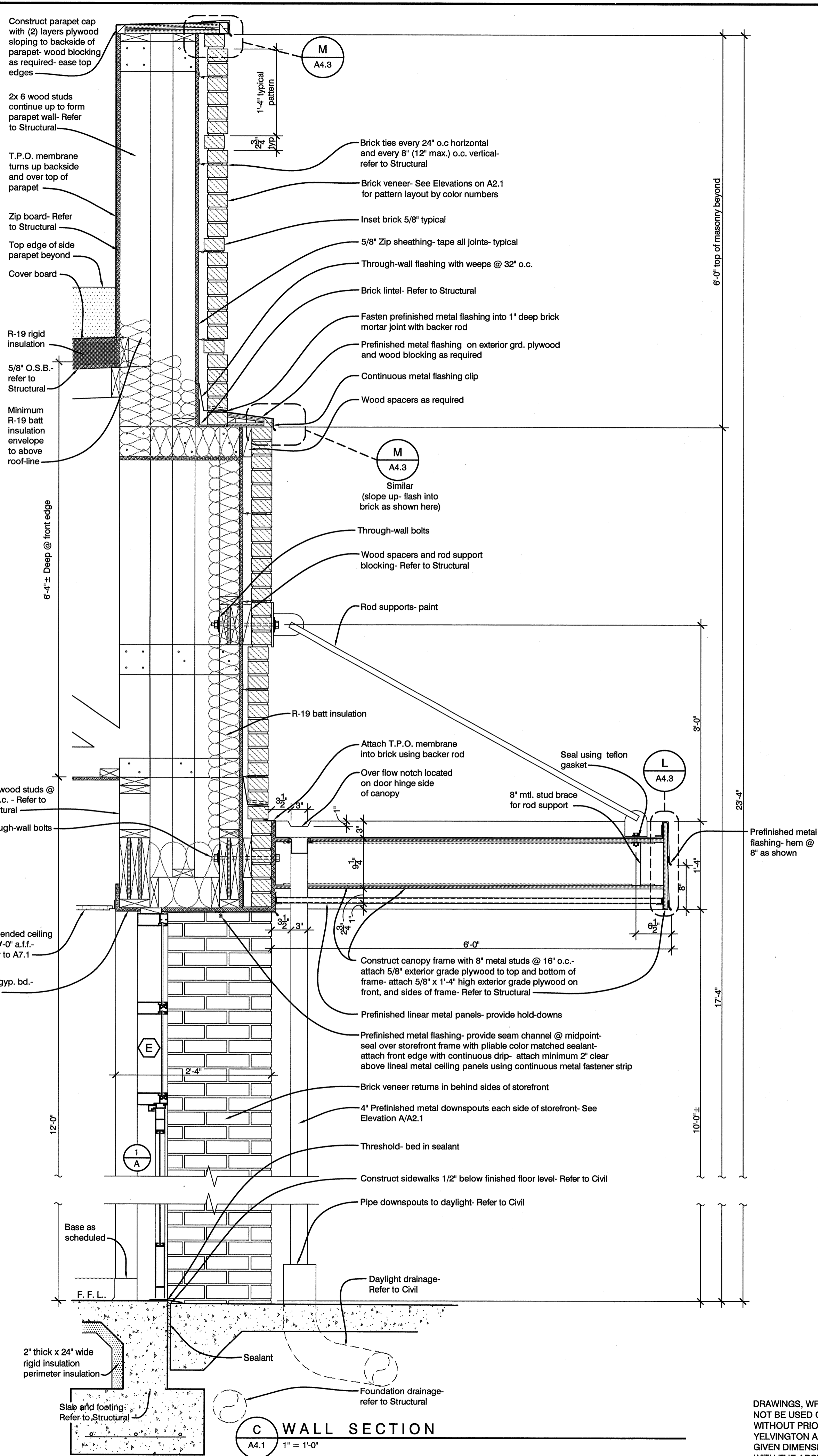
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A4.1 WALL SECTION
1" = 1'-0"



A4.2 WALL SECTION
1" = 1'-0"

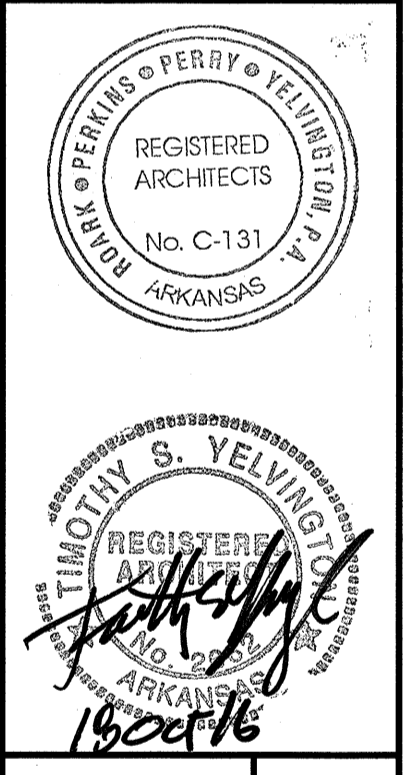


A4.3 WALL SECTION
1" = 1'-0"

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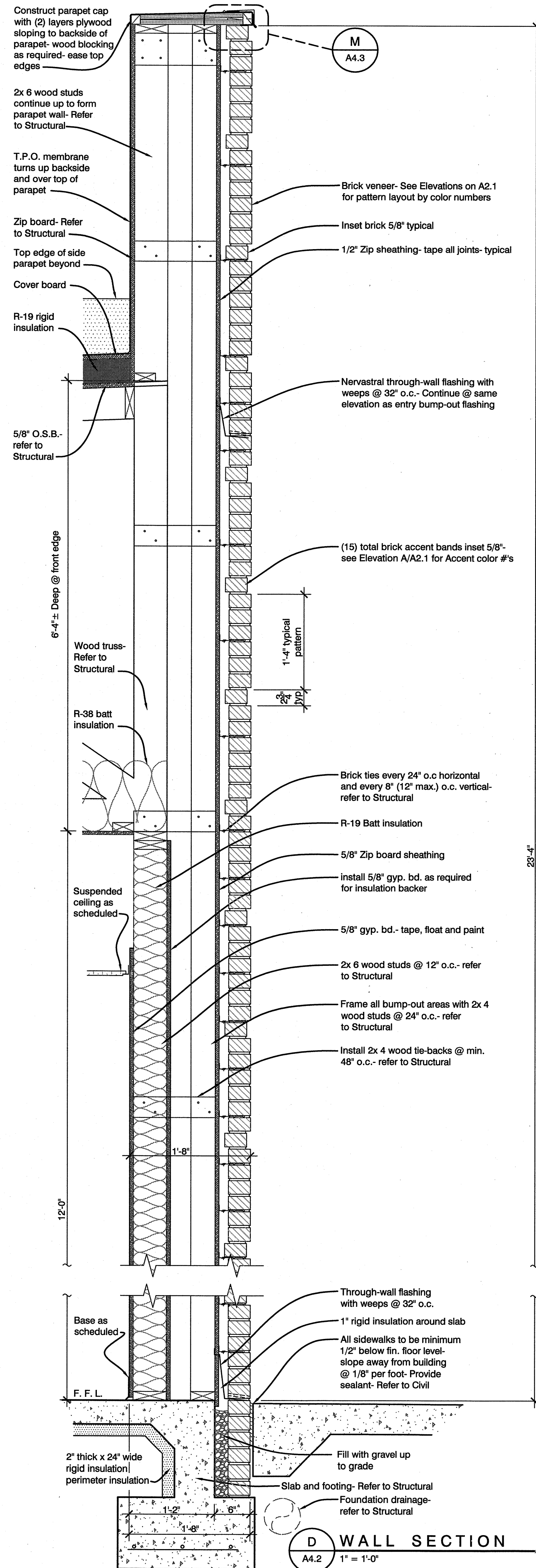


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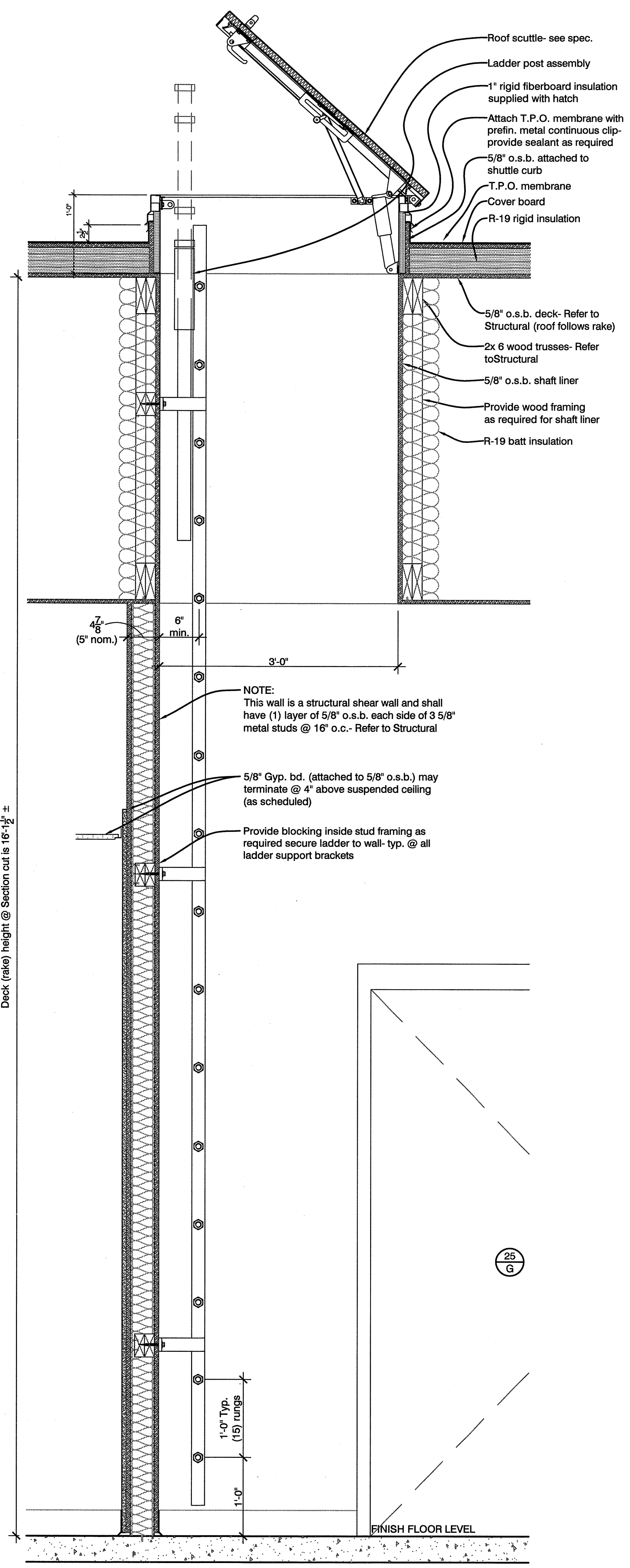
WALL SECTIONS



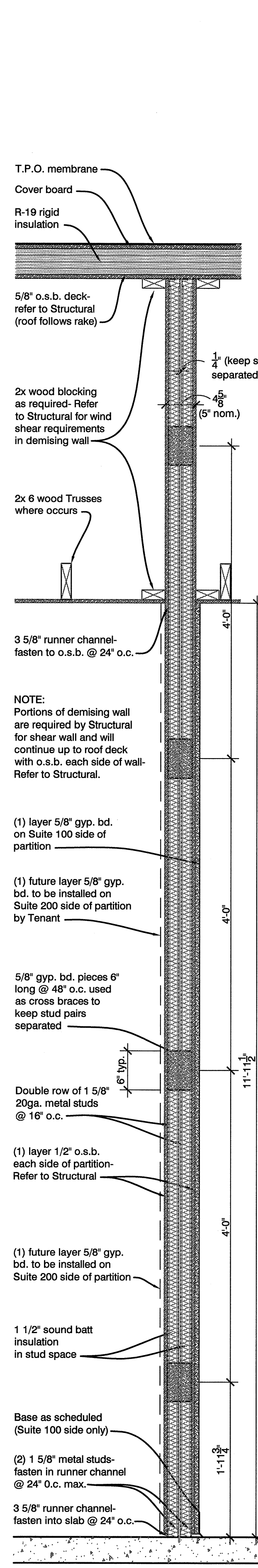
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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A4.1 | 15 |
| SHEET | OF |



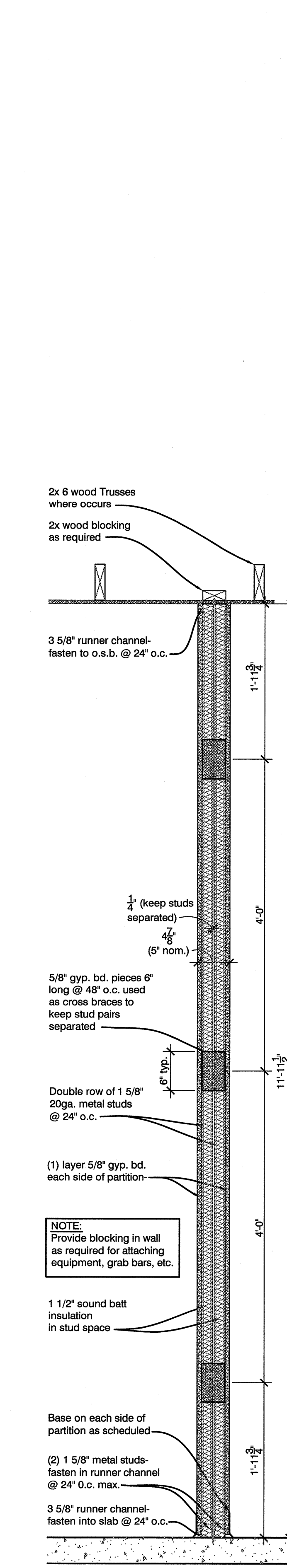
D WALL SECTION
A4.2 1" = 1'-0"



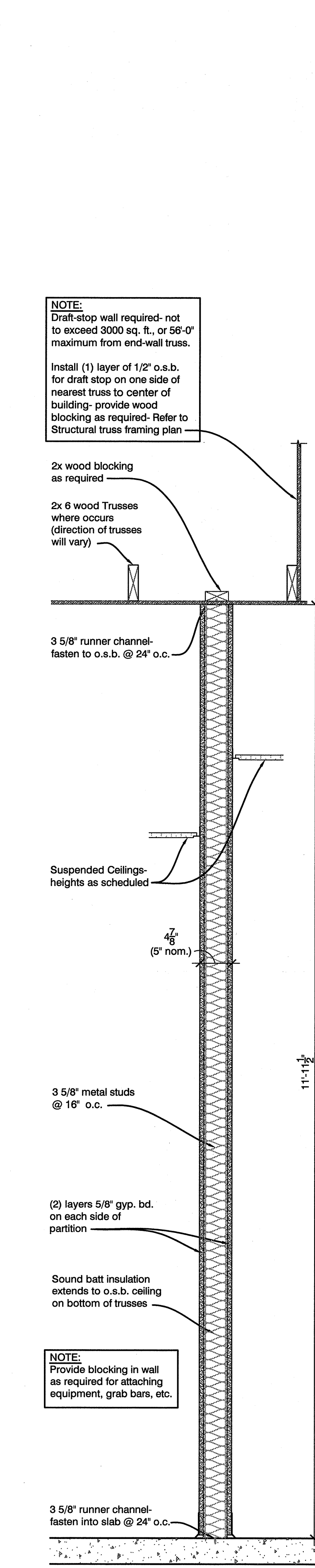
E ROOF SHUTTLE SECTION
A4.2 1" = 1'-0"



F WALL SECTION
1" = 1'-0"



G WALL SECTION
1" = 1'-0"



H WALL SECTION
1" = 1'-0"

NOTE:
Draft-stop wall required- not to exceed 3000 sq. ft., or 56'-0" maximum from end-wall truss.
Install (1) layer of 1/2" o.s.b. for draft stop on one side of nearest truss to center of building- provide wood blocking as required- Refer to Structural truss framing plan.

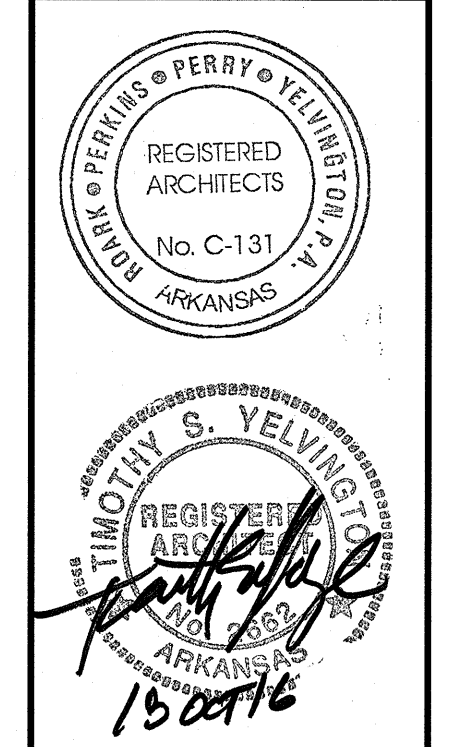
NOTE:
Portions of demising wall are required by Structural for shear wall and will continue up to roof deck with o.s.b. each side of wall- Refer to Structural.

NOTE:
This wall is a structural shear wall and shall have (1) layer of 5/8" o.s.b. each side of 3 5/8" metal studs @ 16" o.c.- Refer to Structural

NOTE:
Provide blocking in wall as required for attaching equipment, grab bars, etc.

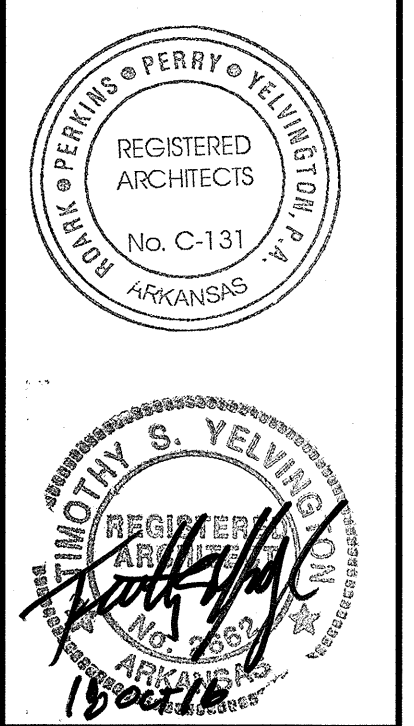
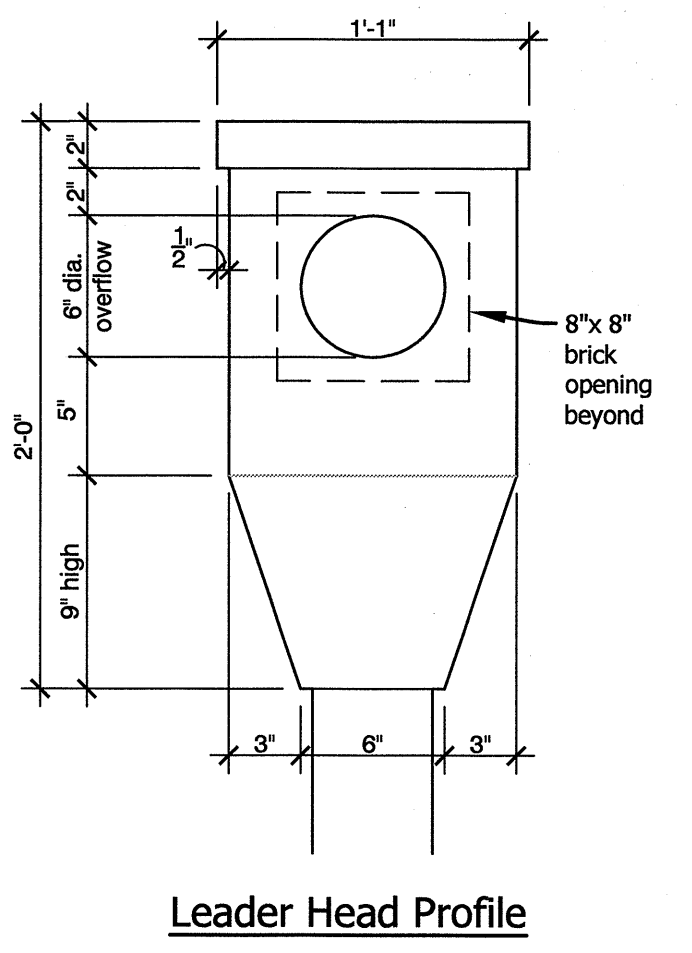
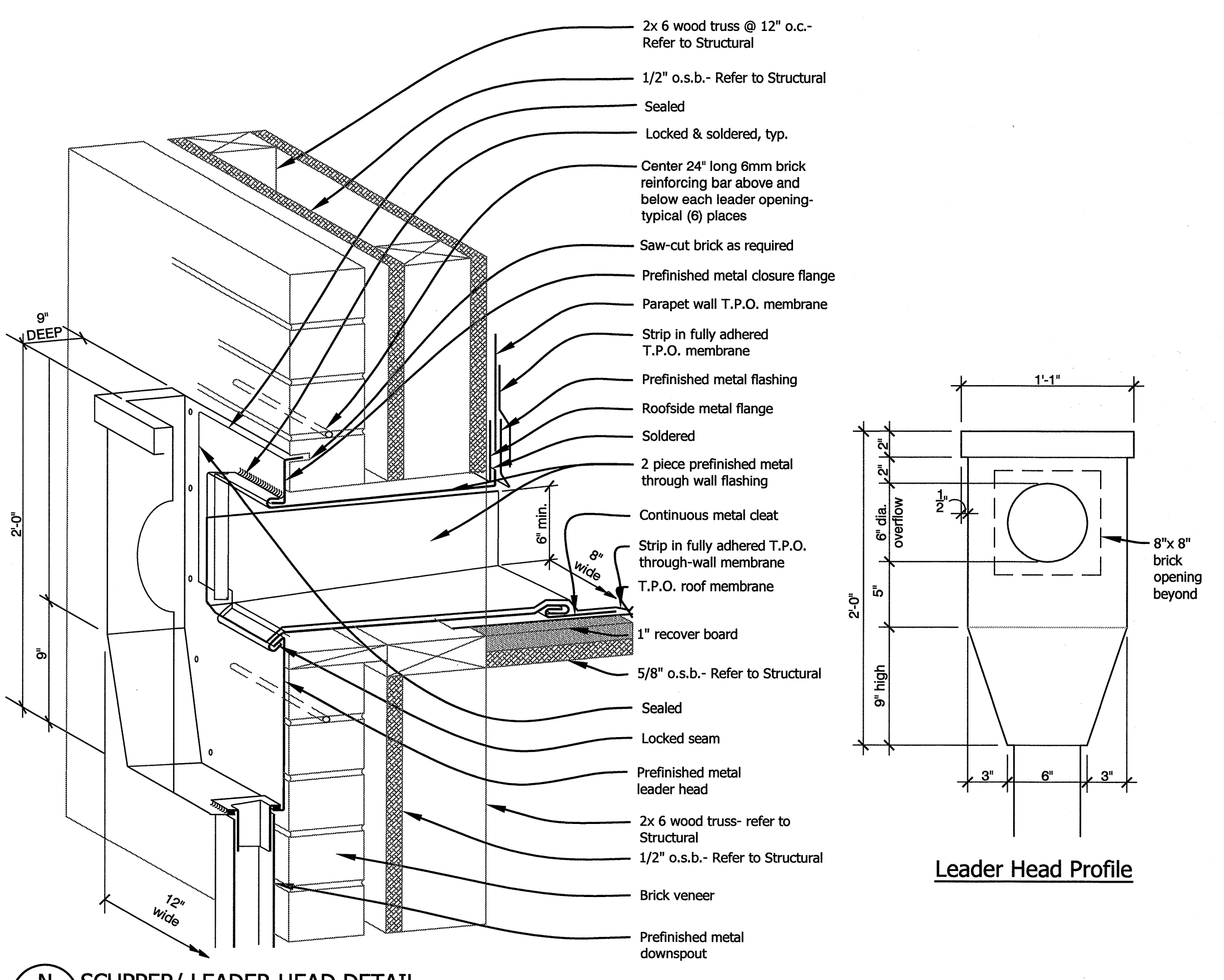
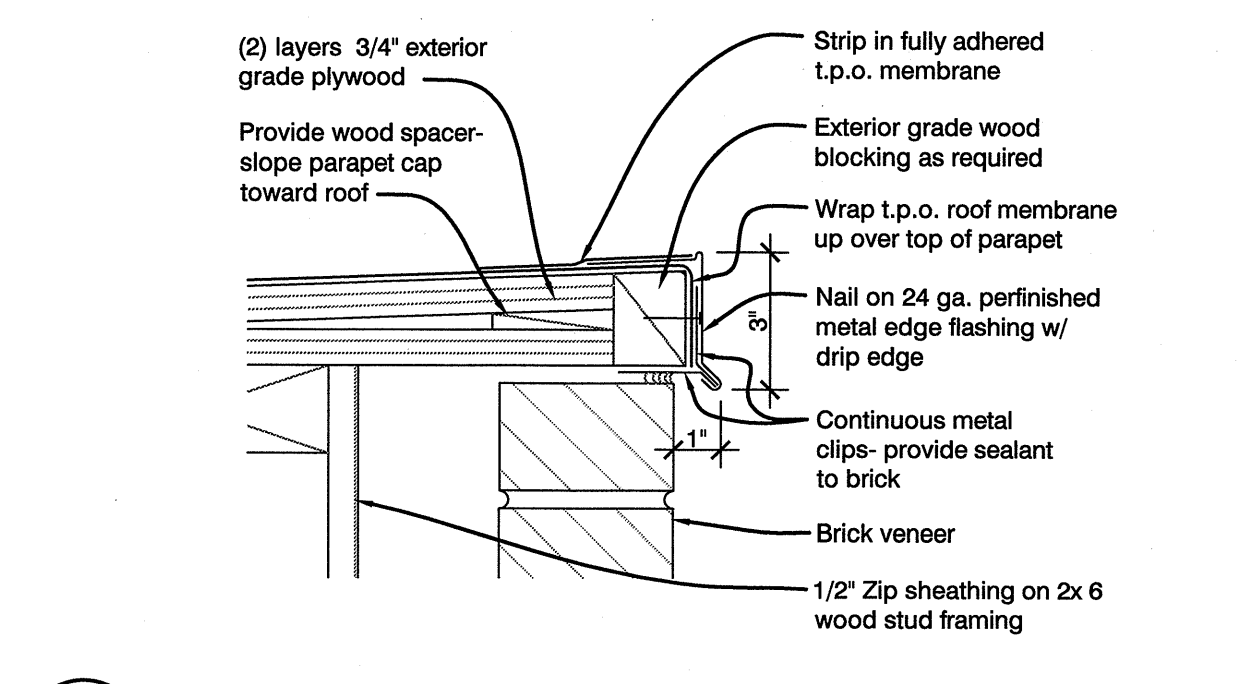
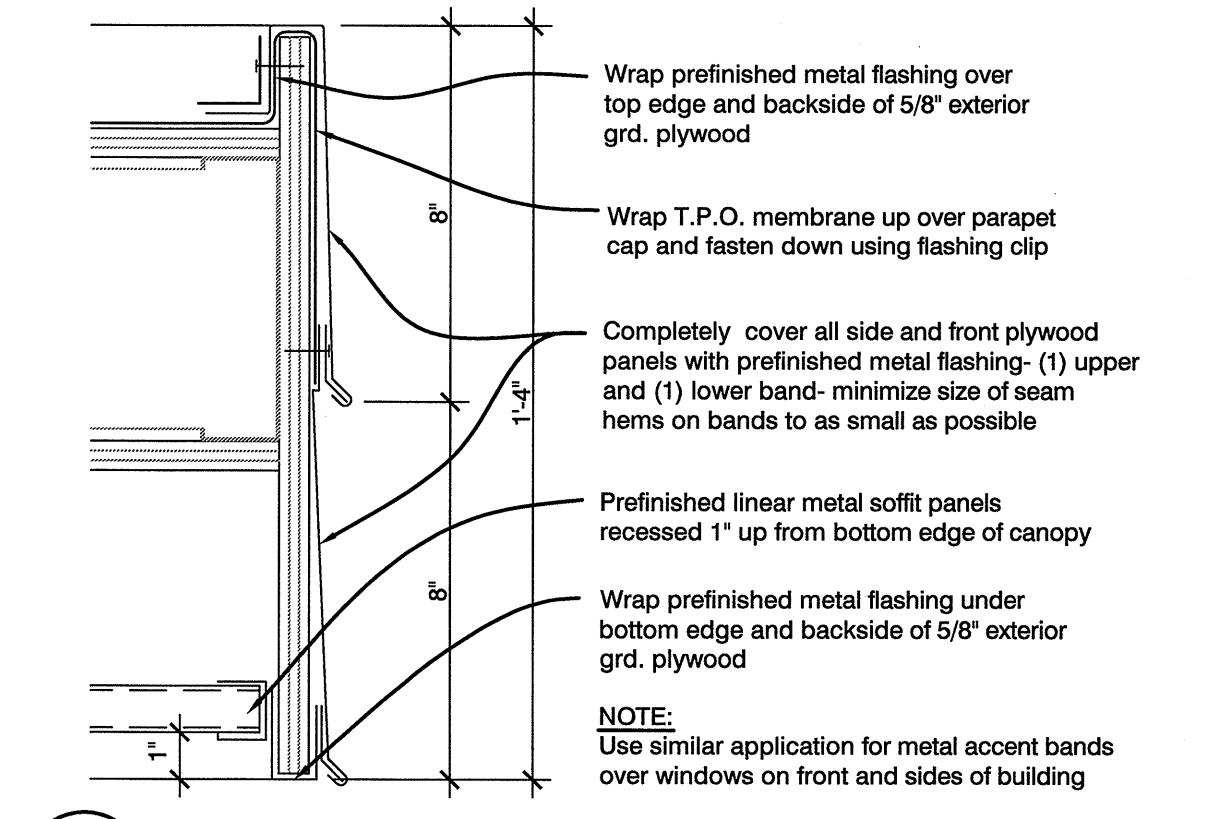
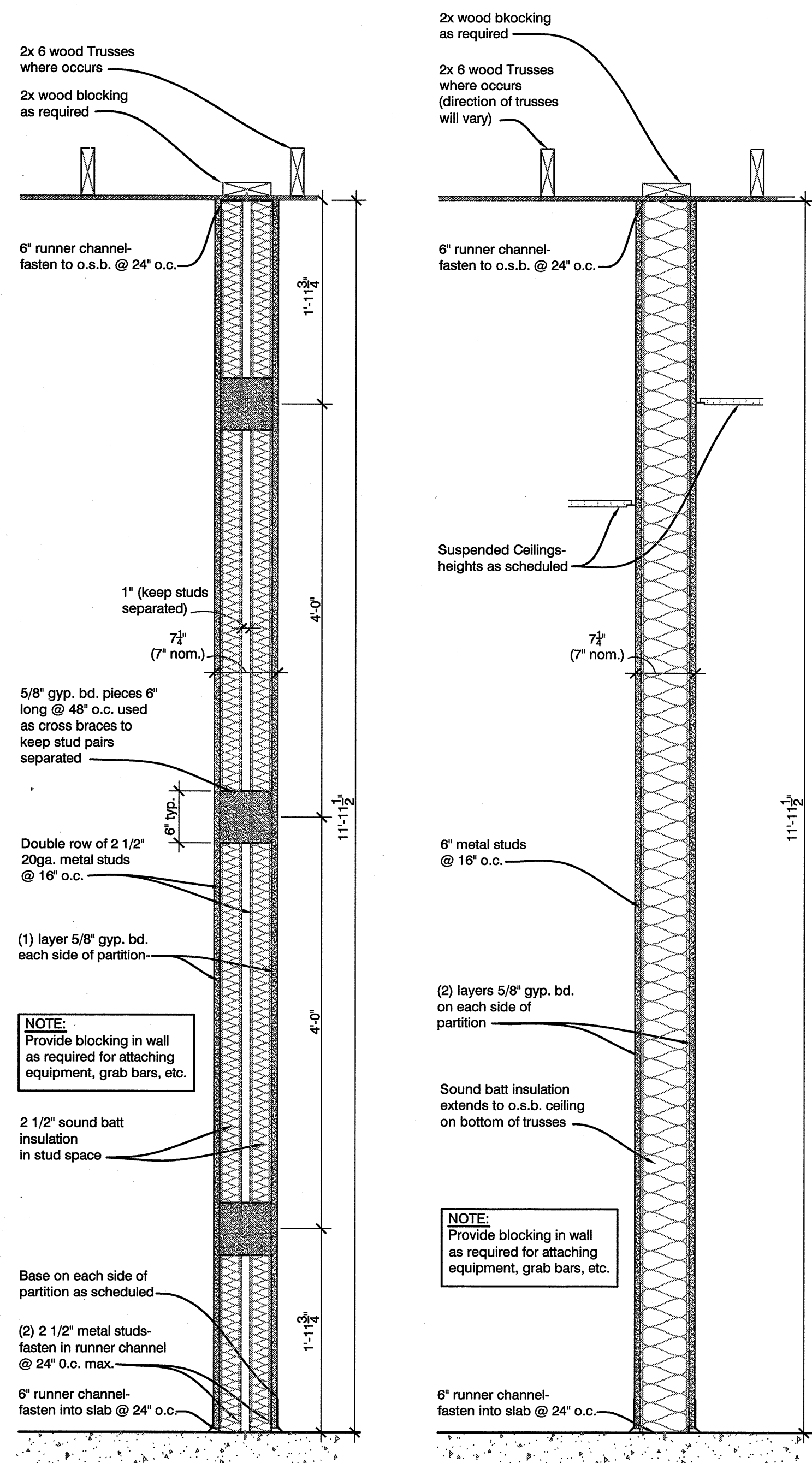
NOTE:
Provide blocking in wall as required for attaching equipment, grab bars, etc.

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WALL SECTIONS



| REVISIONS | DATE |
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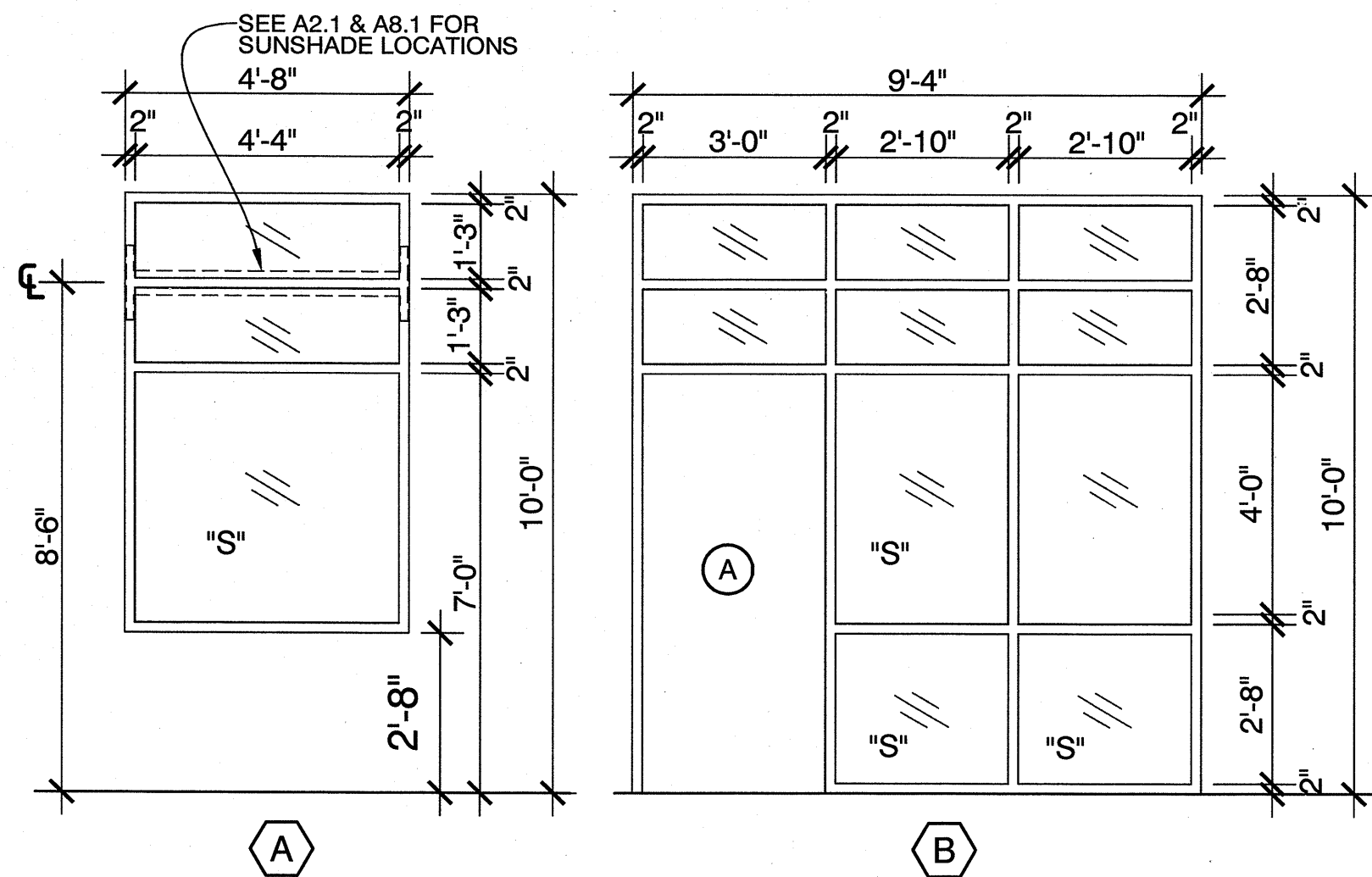
WALL DETAILS



| | |
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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A4.3 | 15 |
| SHEET | OF |

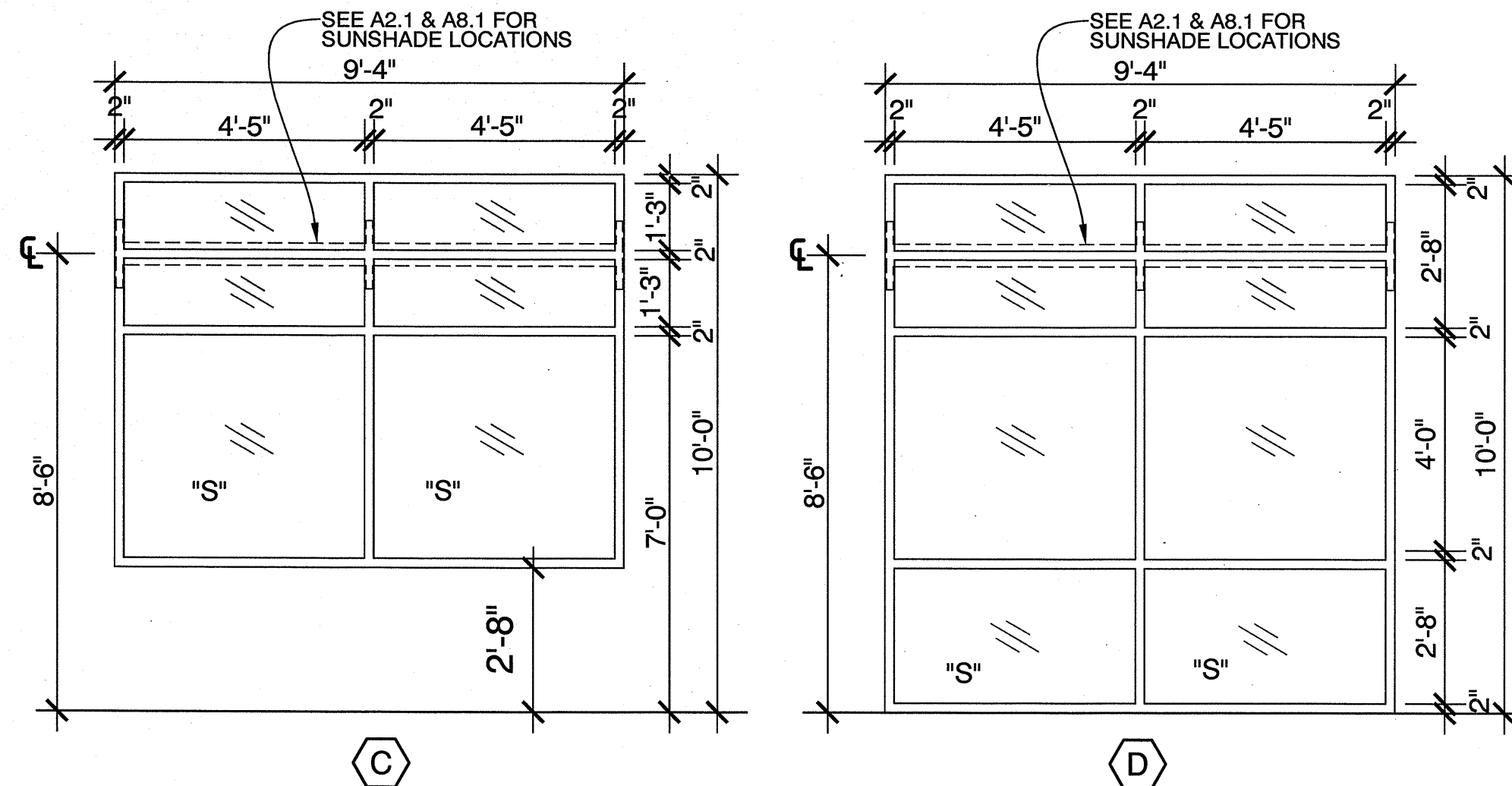
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WINDOW TYPES



ALUMINUM STOREFRONT - 2"x4 1/2";
DARK BRONZE FINISH;
SAFETY GLASS DESIGNATED BY "S"

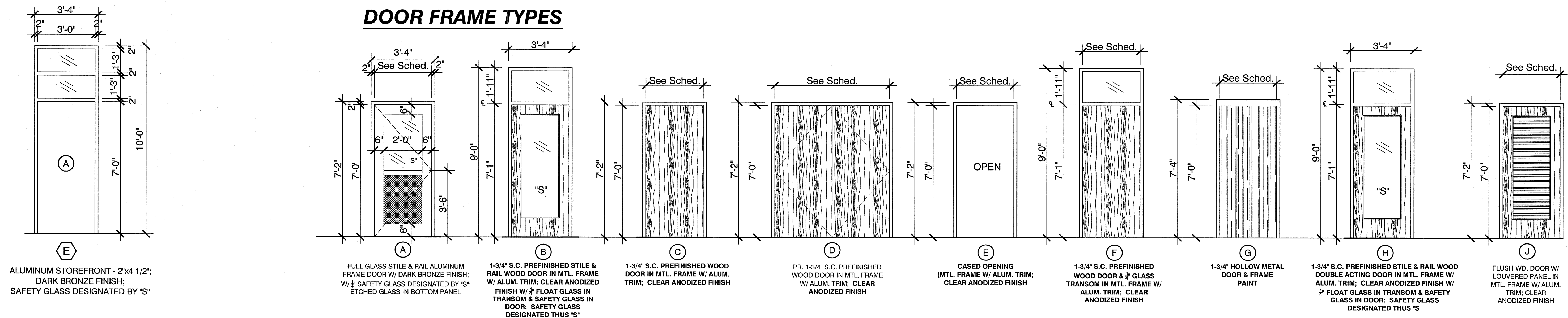
ALUMINUM STOREFRONT - 2"x4 1/2";
DARK BRONZE FINISH;
SAFETY GLASS DESIGNATED BY "S"



ALUMINUM STOREFRONT - 2"x4 1/2";
DARK BRONZE FINISH;
SAFETY GLASS DESIGNATED BY "S"

ALUMINUM STOREFRONT - 2"x4 1/2";
DARK BRONZE FINISH;
SAFETY GLASS DESIGNATED BY "S"

DOOR FRAME TYPES



ALUMINUM STOREFRONT - 2"x4 1/2";
DARK BRONZE FINISH;
SAFETY GLASS DESIGNATED BY "S"

FULL GLASS STILE & RAIL ALUMINUM
FRAME DOOR W/ DARK BRONZE FINISH;
W/ 1/2 SAFETY GLASS DESIGNATED BY "S";
ETCHED GLASS IN BOTTOM PANEL

1-3/4" S.C. PREFINISHED STILE & RAIL
WOOD DOOR IN MTL. FRAME
W/ ALUM. TRIM; CLEAR ANODIZED
FINISH W/ 1/2 FLOAT GLASS IN
TRANSOM & SAFETY GLASS IN
DOOR; SAFETY GLASS
DESIGNATED THUS "S"

1-3/4" S.C. PREFINISHED WOOD
DOOR IN MTL. FRAME W/ ALUM.
TRIM; CLEAR ANODIZED FINISH

PR. 1-3/4" S.C. PREFINISHED
WOOD DOOR IN MTL. FRAME
W/ ALUM. TRIM; CLEAR
ANODIZED FINISH

CASED OPENING
(MTL. FRAME W/ ALUM. TRIM;
CLEAR ANODIZED FINISH

1-3/4" S.C. PREFINISHED
WOOD DOOR & 1/2 GLASS
TRANSOM IN MTL. FRAME W/
ALUM. TRIM; CLEAR
ANODIZED FINISH

1-3/4" HOLLOW METAL
DOOR & FRAME
PAINT

1-3/4" S.C. PREFINISHED STILE & RAIL WOOD
DOUBLE ACTING DOOR IN MTL. FRAME W/
ALUM. TRIM; CLEAR ANODIZED FINISH W/
1/2 FLOAT GLASS IN TRANSOM & SAFETY
GLASS IN DOOR; SAFETY GLASS
DESIGNATED THUS "S"

FLUSH WD. DOOR W/
LOUVERED PANEL IN
MTL. FRAME W/ ALUM.
TRIM; CLEAR
ANODIZED FINISH

FINISH SCHEDULE

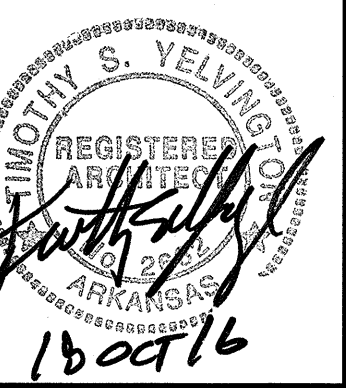
| RM No. | ROOM NAME | FLOOR | BASE | WALLS | CEILING | CLG. HT. | REMARKS |
|-------------|------------------------------------|-----------------------|-----------------|--|--|----------------|----------------|
| 101 | ENTRY | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT / TILE* | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 102 | WAITING | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT / TILE* | 2 X 2 SUSP.; GYP. BD - PAINT | 10'-0" A.F.F. | |
| 103 | CORRIDOR | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 104 | DATA/I.T. | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | GYP BOARD; PAINT | 9'-0" A.F.F. | |
| 105 | CORRIDOR | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 106 | RECEPTION/BUS. OFFICE | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 107 | CONSULTATION | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 108 | PUBLIC TOILET | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 109 | PUBLIC TOILET | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 110 | (OMITTED) | | | | | | |
| 111 | CORRIDOR | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 112 | OFFICE | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 113 | PAN | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 114 | N20 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP.; GYP. BD - PAINT | 9'-0" A.F.F. | |
| 115 | (OMITTED) | | | | | | |
| 116 | CORRIDOR | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 117 | TREATMENT #5 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 118 | TREATMENT #6 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 119 | TREATMENT #7 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 120 | (OMITTED) | | | | | | |
| 121 | TREATMENT #8 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 122 | TREATMENT #9 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 123 | CORRIDOR | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 124 | OFFICE | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 125 | STERILIZATION, RE-SUPPLY & STORAGE | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 126 | LAB & MODEL STORAGE | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 127 | STAFF LOUNGE / CONFERENCE | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 128 | LOCKER ROOM | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 129 | STAFF TOILET | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 9'-0" A.F.F. | |
| 130 | (OMITTED) | | | | | | |
| 131 | CORRIDOR | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP.; GYP. BD - PAINT | 10'-0" A.F.F. | |
| 132 | JANITOR / MECHANICAL | FAUX WOOD PLANKS | 4" RUBBER COVE | GYP. BOARD; PAINT | O.S.B.; PAINT | BTM OF STRUCT. | |
| 133 | BUILDING COMMON | SEALED CONCRETE | MILLWORK RUBBER | GYP. BOARD; PAINT | O.S.B.; PAINT | BTM OF STRUCT. | |
| 134 | TREATMENT #4 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 135 | TREATMENT #3 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 136 | TREATMENT #2 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| 137 | TREATMENT #1 | FAUX WOOD PLANKS | MILLWORK RUBBER | GYP. BOARD; PAINT | 2 X 2 SUSP. | 10'-0" A.F.F. | |
| SUITE 200 | | EXPOSED CONCRETE SLAB | NO BASE | NO GYP. BOARD; INTERIOR WALLS EXPOSED TO STUDS & INSULATION | NO SUSP. CEILING; EXPOSED TO O.S.B. ON BOTTOM OF TRUSSES | | BTM OF STRUCT. |
| BLDG COMMON | | EXPOSED CONCRETE SLAB | 4" RUBBER COVE | OSB; PAINT | OSB; PAINT | | BTM OF STRUCT. |

DOOR SCHEDULE

| NO. | DOOR SIZE | DOOR & FRAME TYPE | HARDWARE | VISION PANEL | REMARKS |
|-----|-----------|-------------------|----------|--------------|---------|
| 1 | 3070 | A/B | 1 | | |
| 2 | 3070 | H | 9 | | |
| 3 | 3070 | C | 6 | | |
| 4 | 3070 | C | 6 | | |
| 5 | 3070 | B | 8 | | |
| 6 | 3070 | E | N/A | | |
| 7 | 3070 | J | 5 | | |
| 8 | 3070 | B | 8 | | |
| 9 | 3070 | B | 8 | | |
| 10 | (OMITTED) | --- | --- | | |
| 11 | 3070 | B | 4 | | |
| 12 | 3070 | A/E | 1 | | |
| 13 | PR. 3070 | D | 7 | | |
| 14 | 3070 | A/E | 1 | | |
| 15 | 3070 | F | 5 | | |
| 16 | 3070 | B | 4 | | |
| 17 | 3070 | E | N/A | | |
| 18 | 3070 | E | N/A | | |
| 19 | 3070 | B | 5 | | |
| 20 | (OMITTED) | --- | --- | | |
| 21 | 3070 | E | N/A | | |
| 22 | 3070 | C | 6 | | |
| 23 | 3070 | F | 4 | | |
| 24 | 3070 | C | 3 | | |
| 25 | 3070 | G | 2 | | |
| 26 | 3070 | A | 1 | | |
| 27 | 3070 | A/B | 1 | | |
| 28 | 3070 | H | 9 | | |

ROARK PERKINS PERRY YELVINGTON
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719 W. SECOND STREET - LITTLE ROCK AR 72601-2827
(501)526-2822 WWW.RPPYARCHITECTS.COM

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Highway 5 Bryant, Arkansas



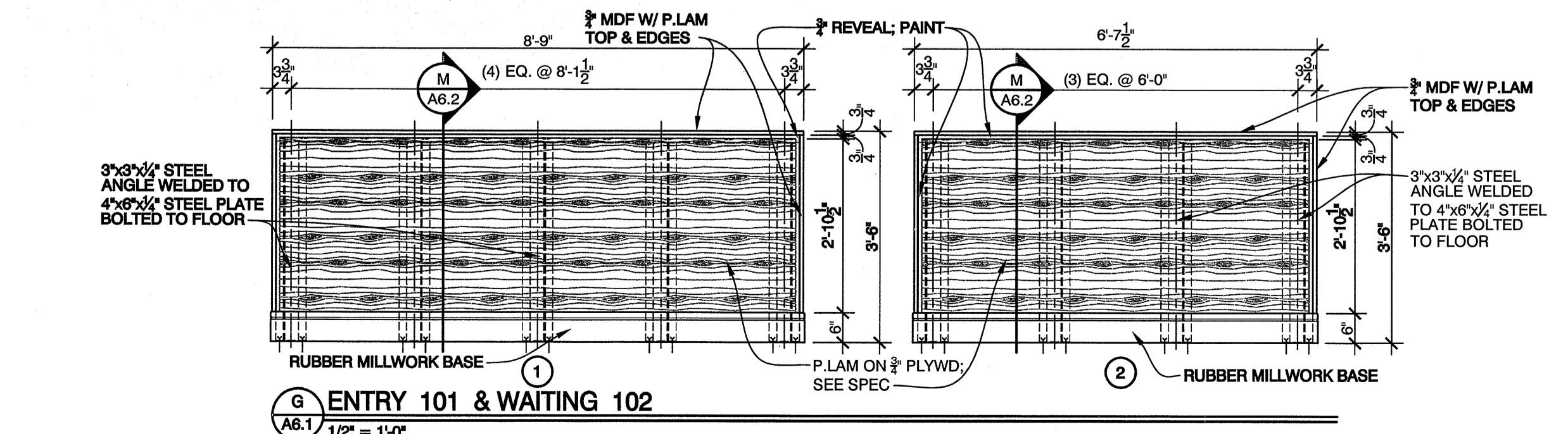
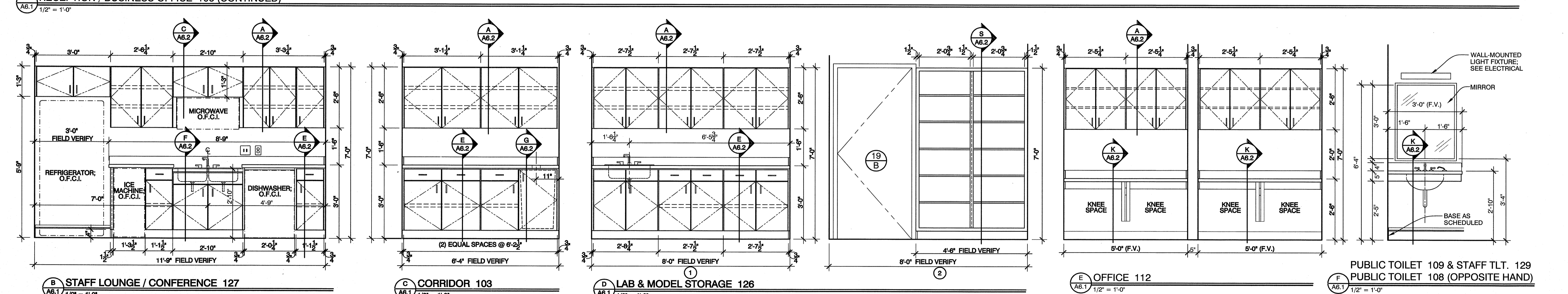
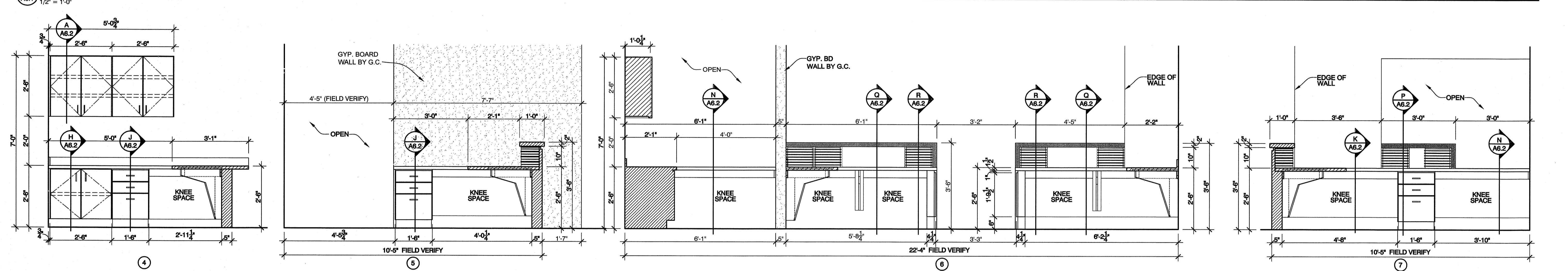
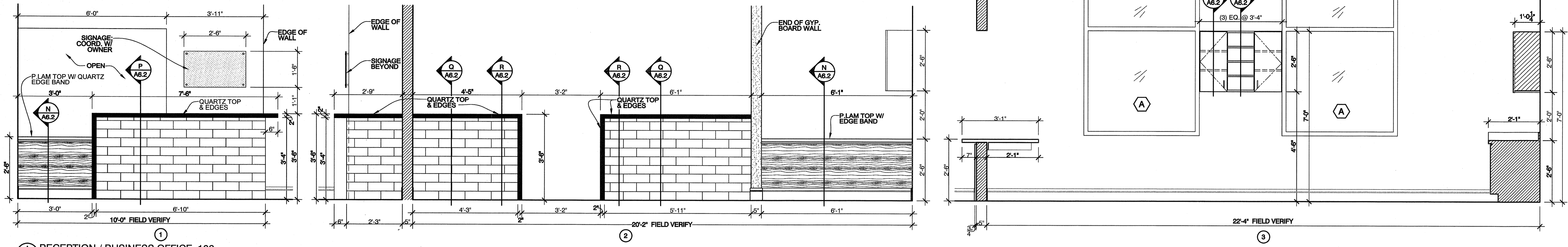
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SCHEDULES,
DOOR AND
WINDOW
TYPES



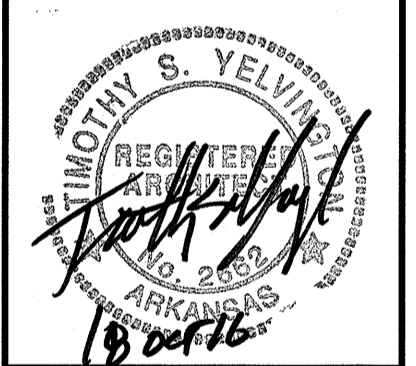
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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A5.1 | 15 |
| SHEET | OF |

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Dental Clinic & Shell Building for Dr. Clint Fulks
 Highway 5 Bryant, Arkansas



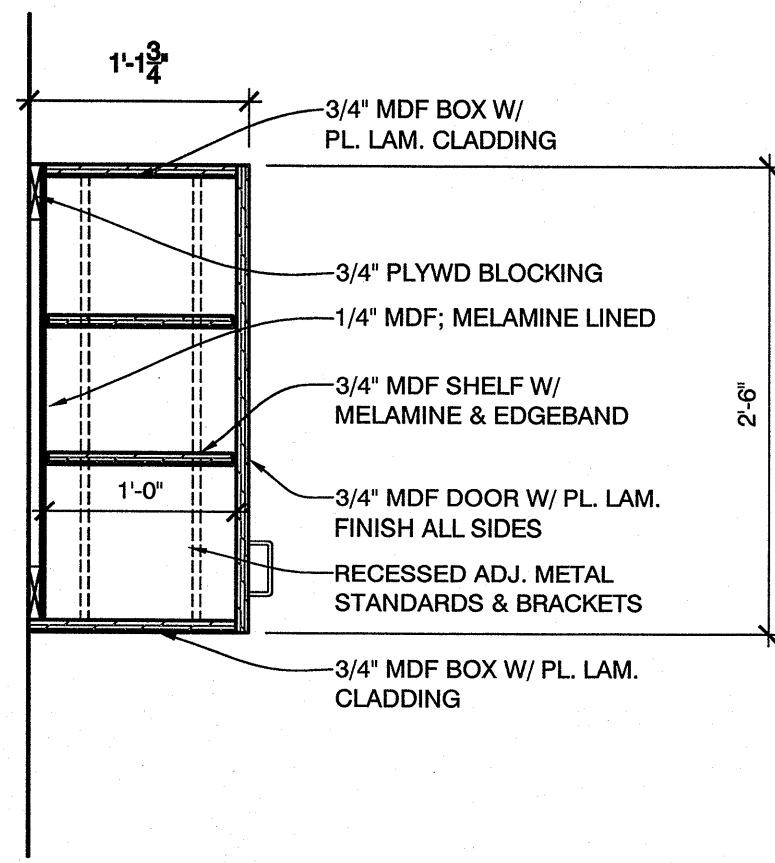
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| ADDENDUM 4 | 5/31/16 |
| REVISIONS | DATE |

MILLWORK ELEVATIONS

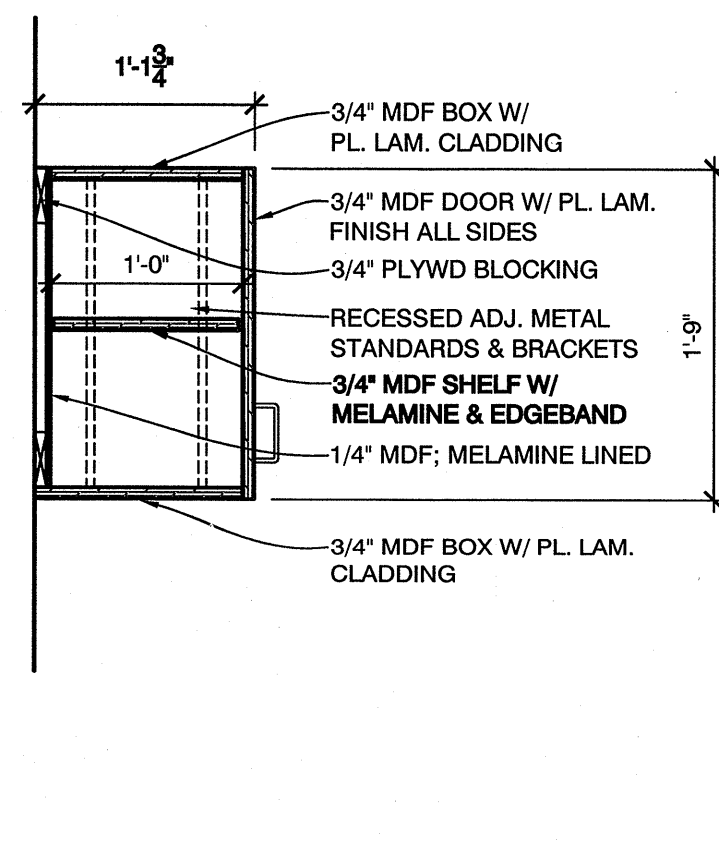


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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A6.1 | 15 |
| SHEET | OF |

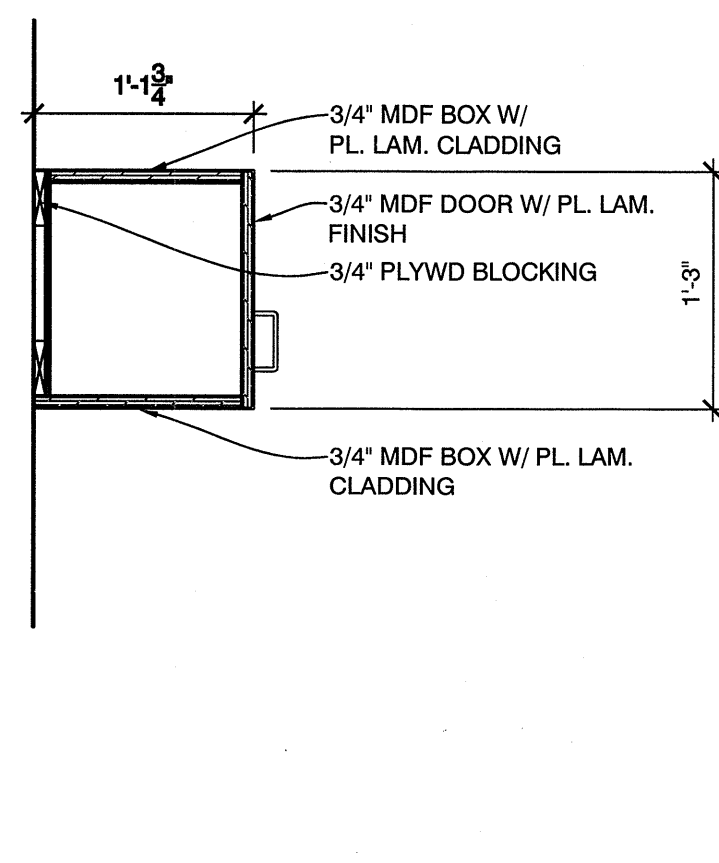
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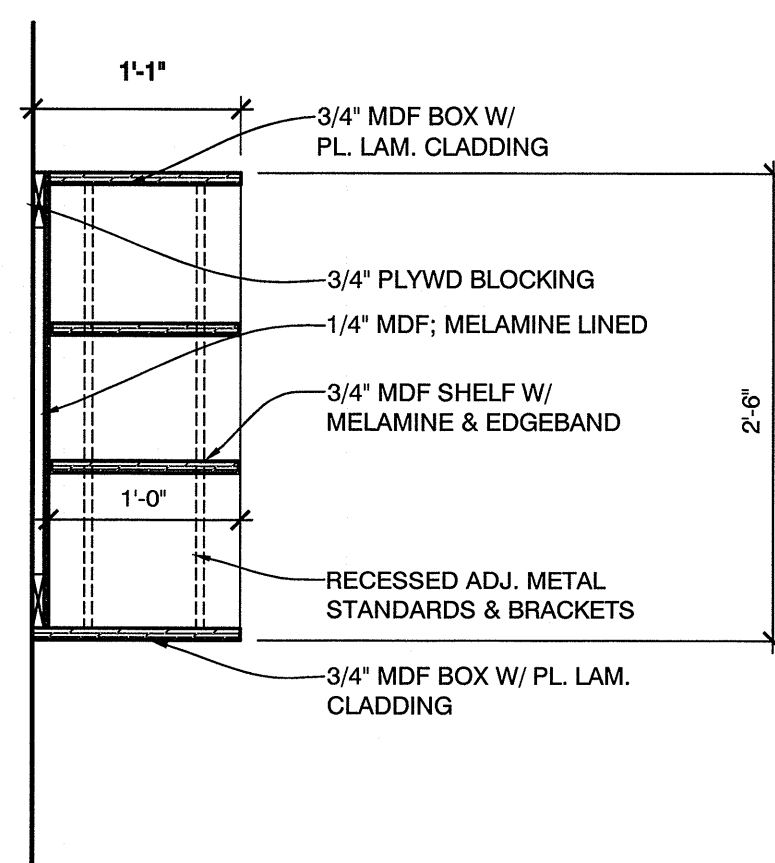
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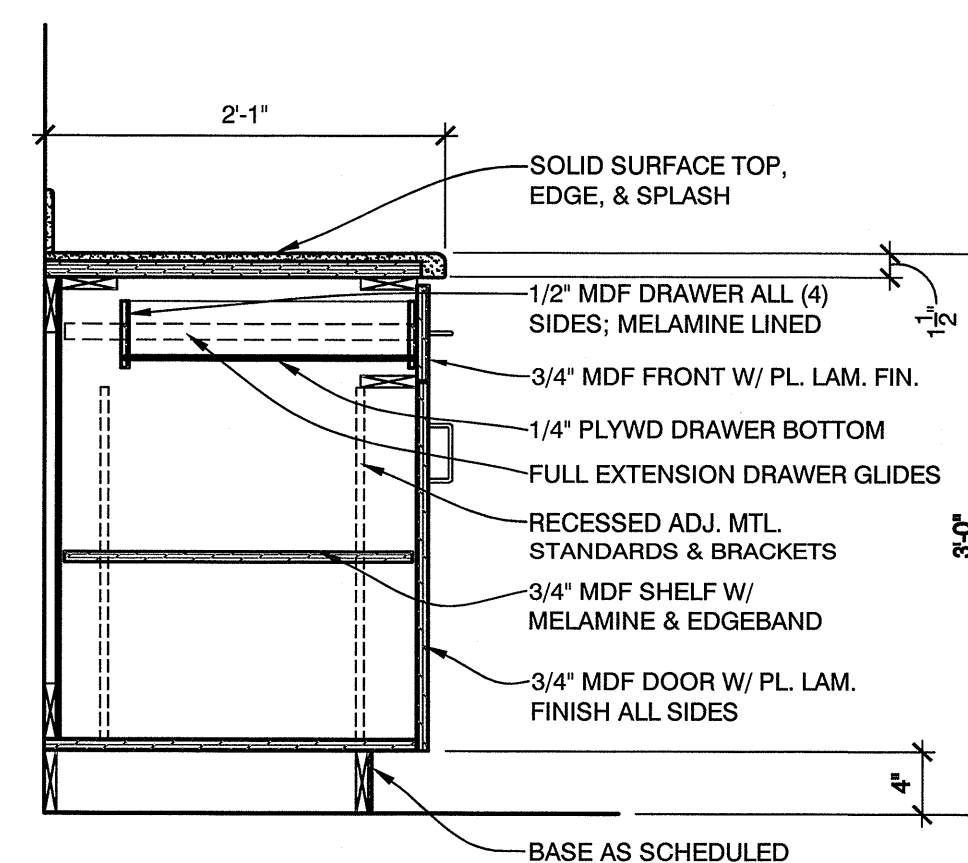
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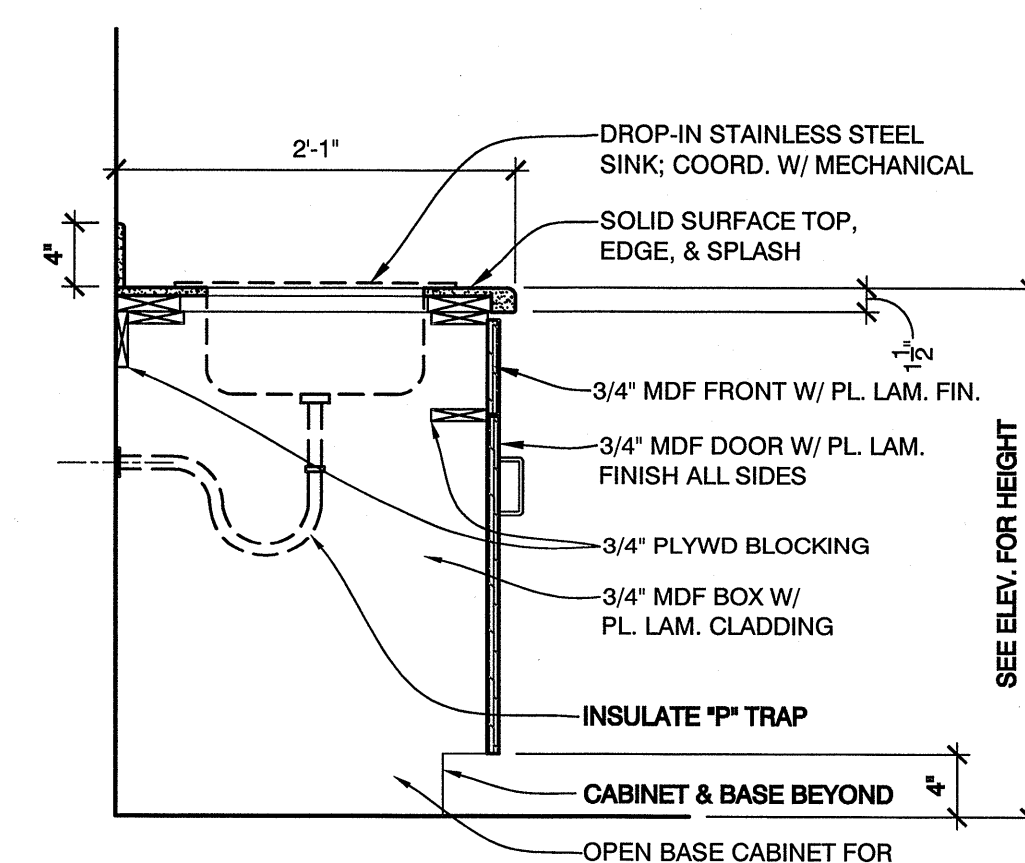
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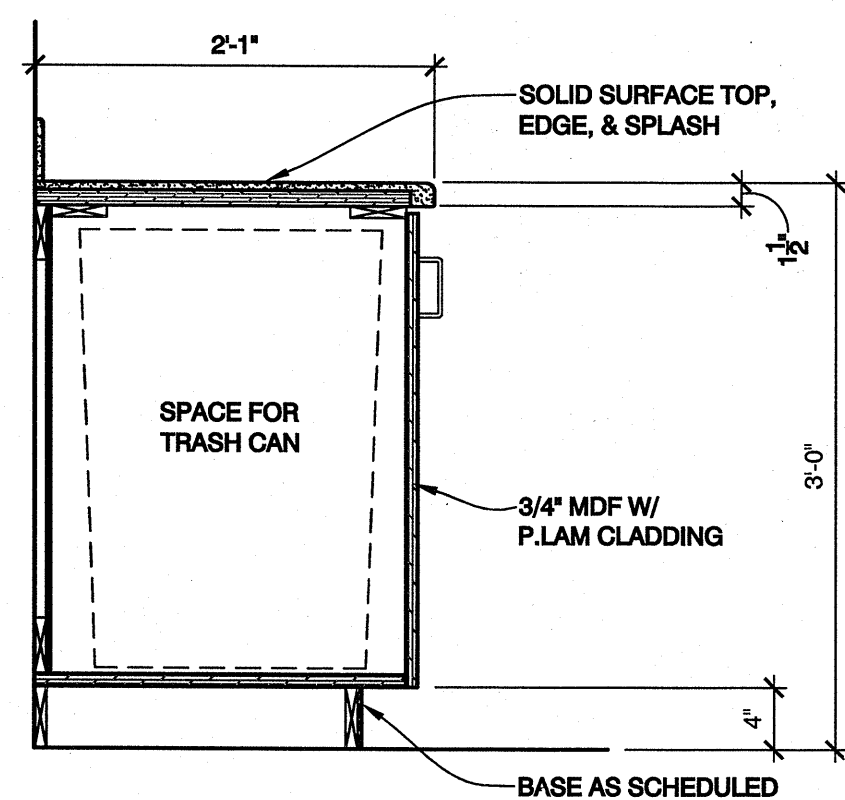
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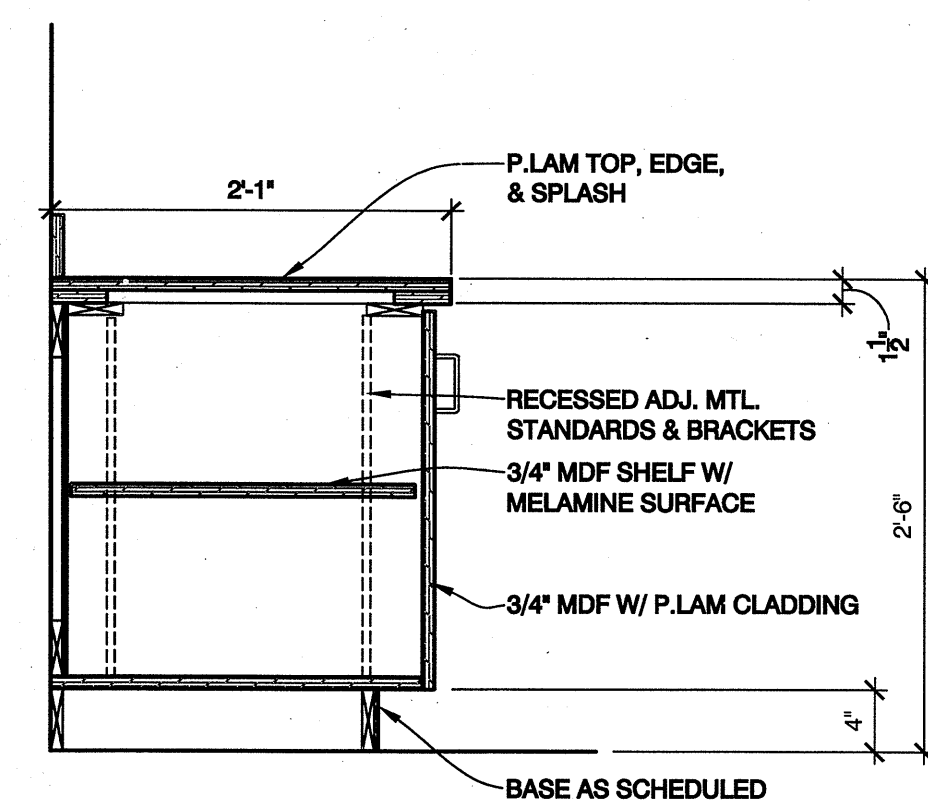
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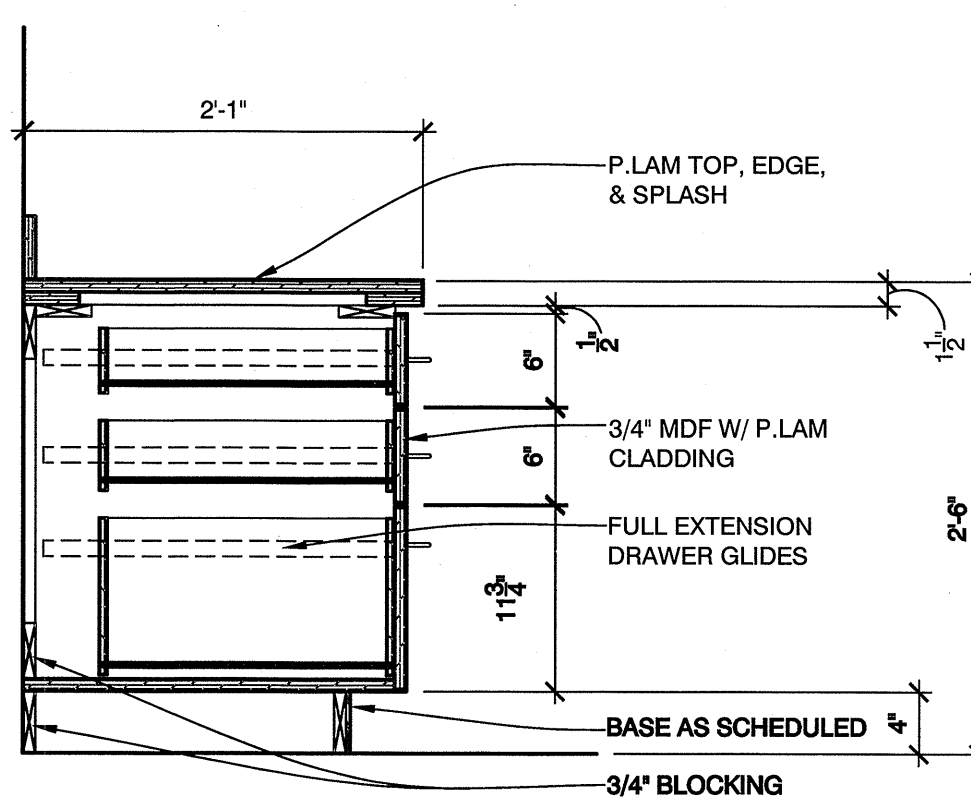
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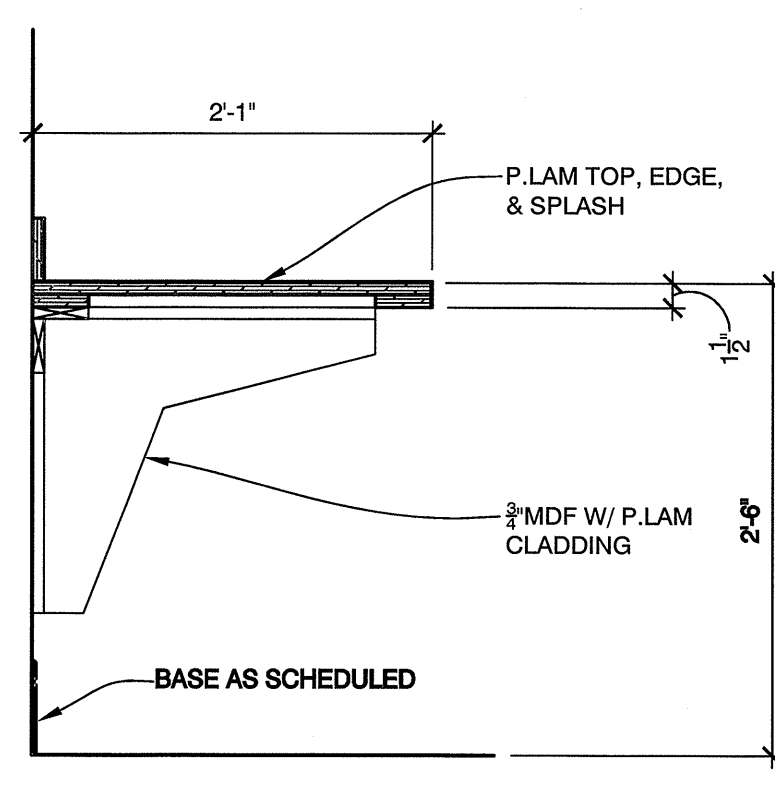
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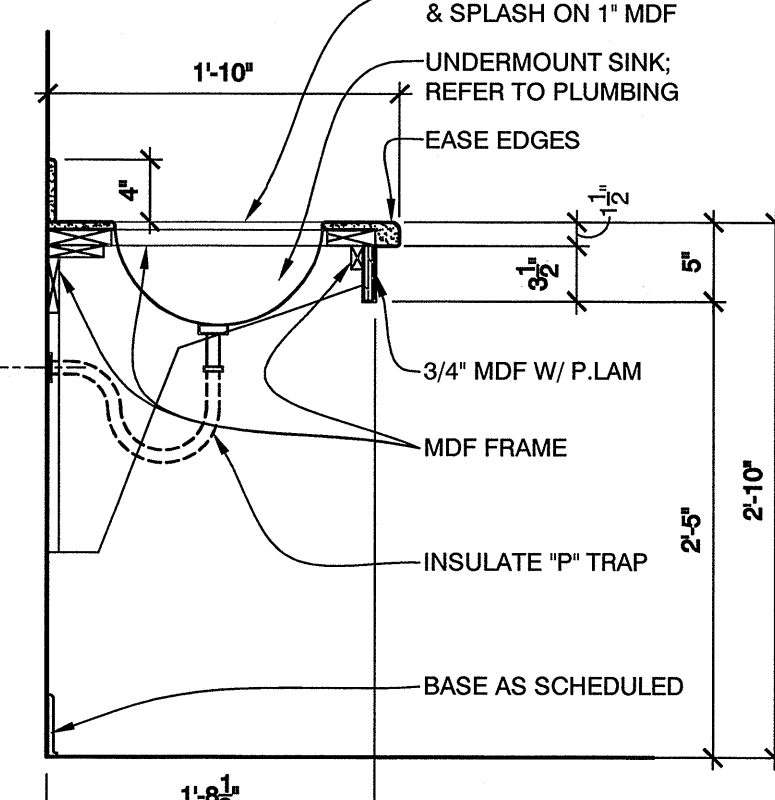
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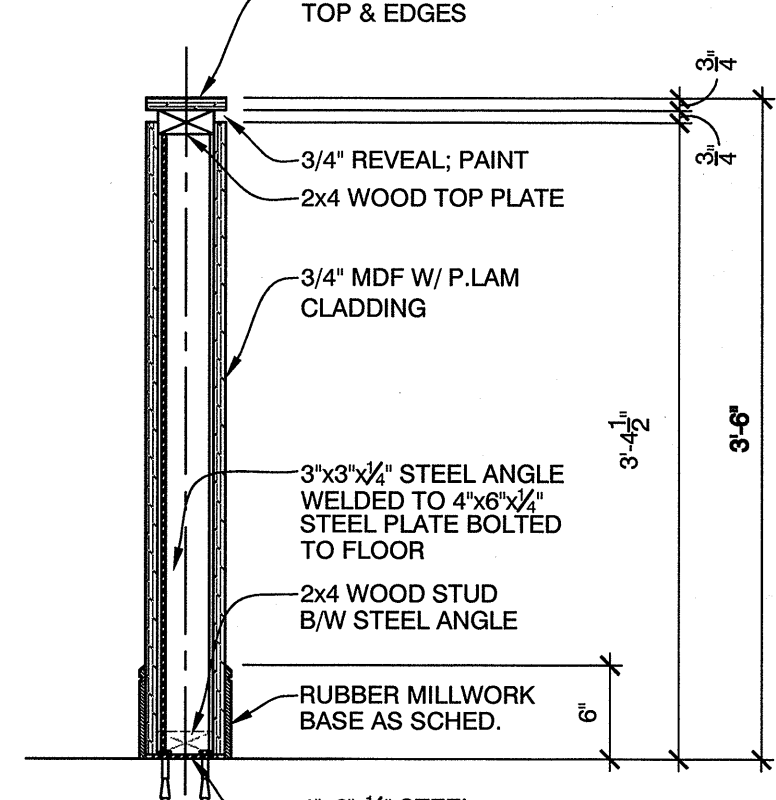
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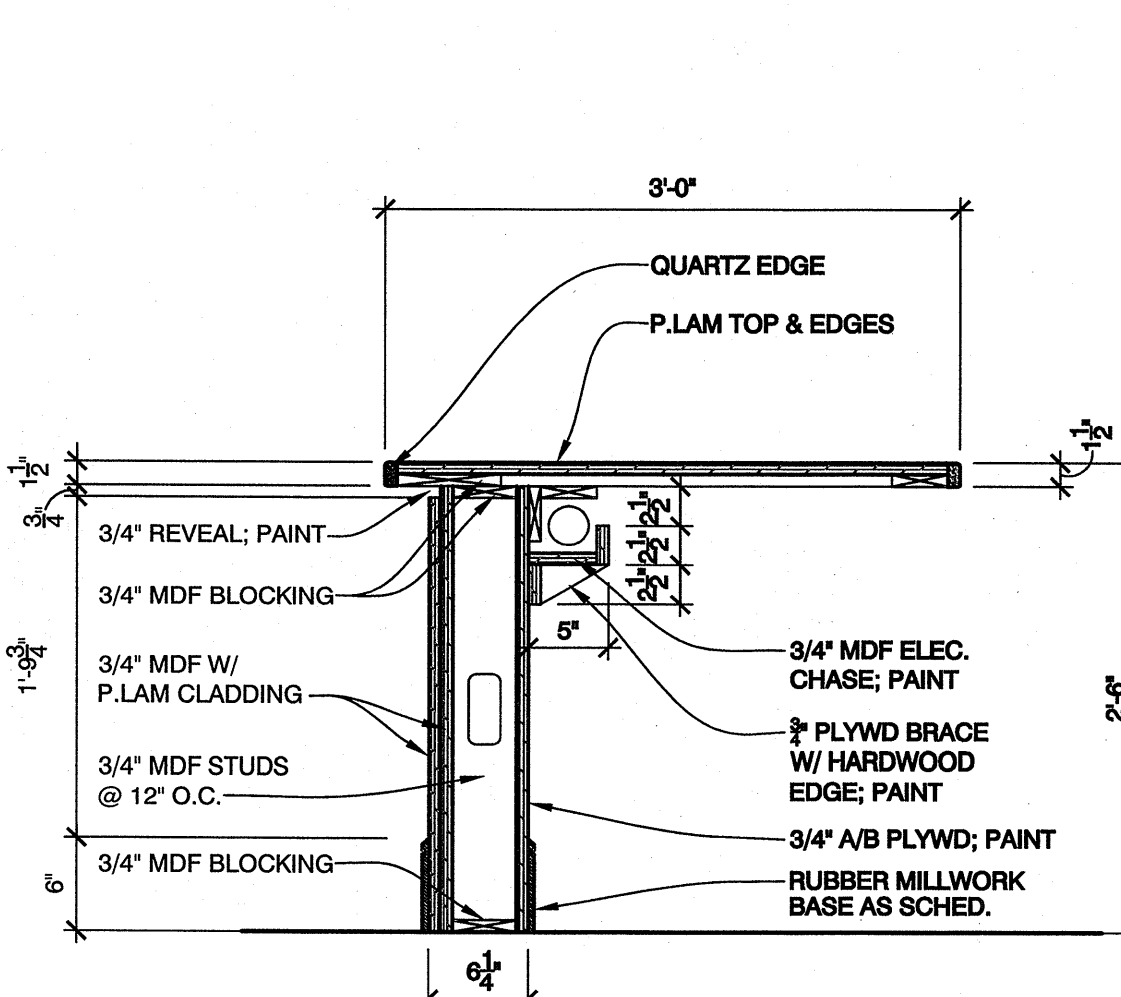
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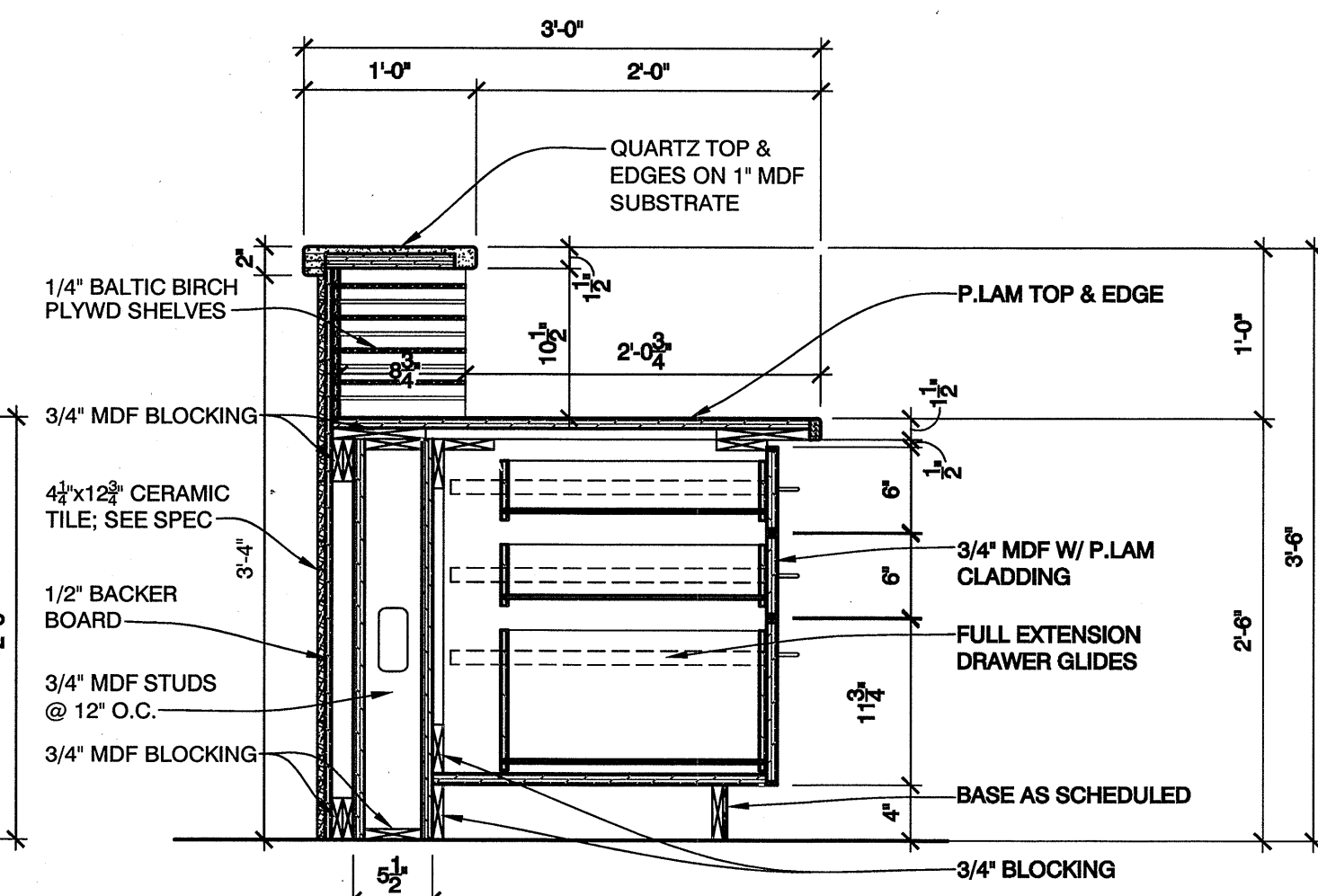
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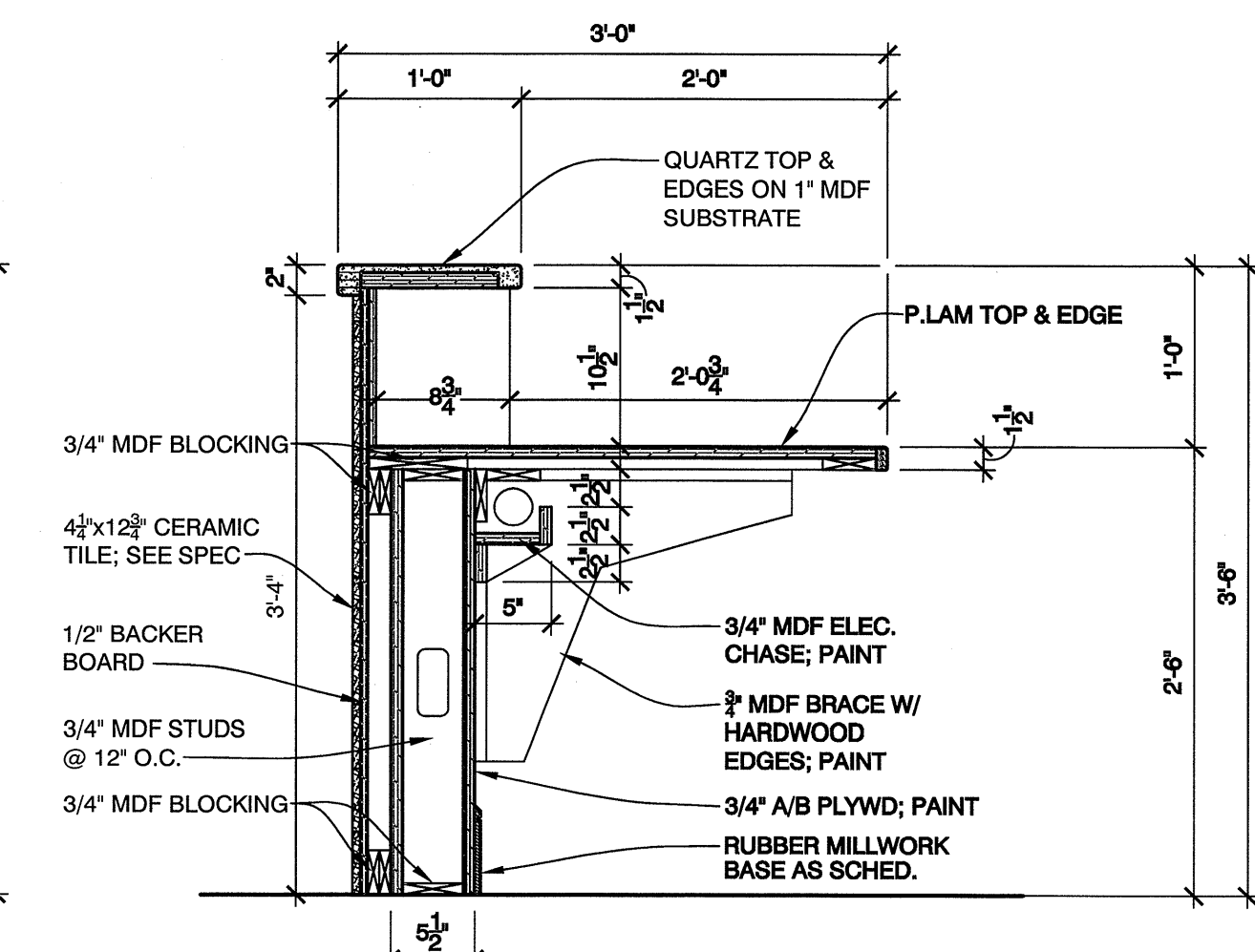
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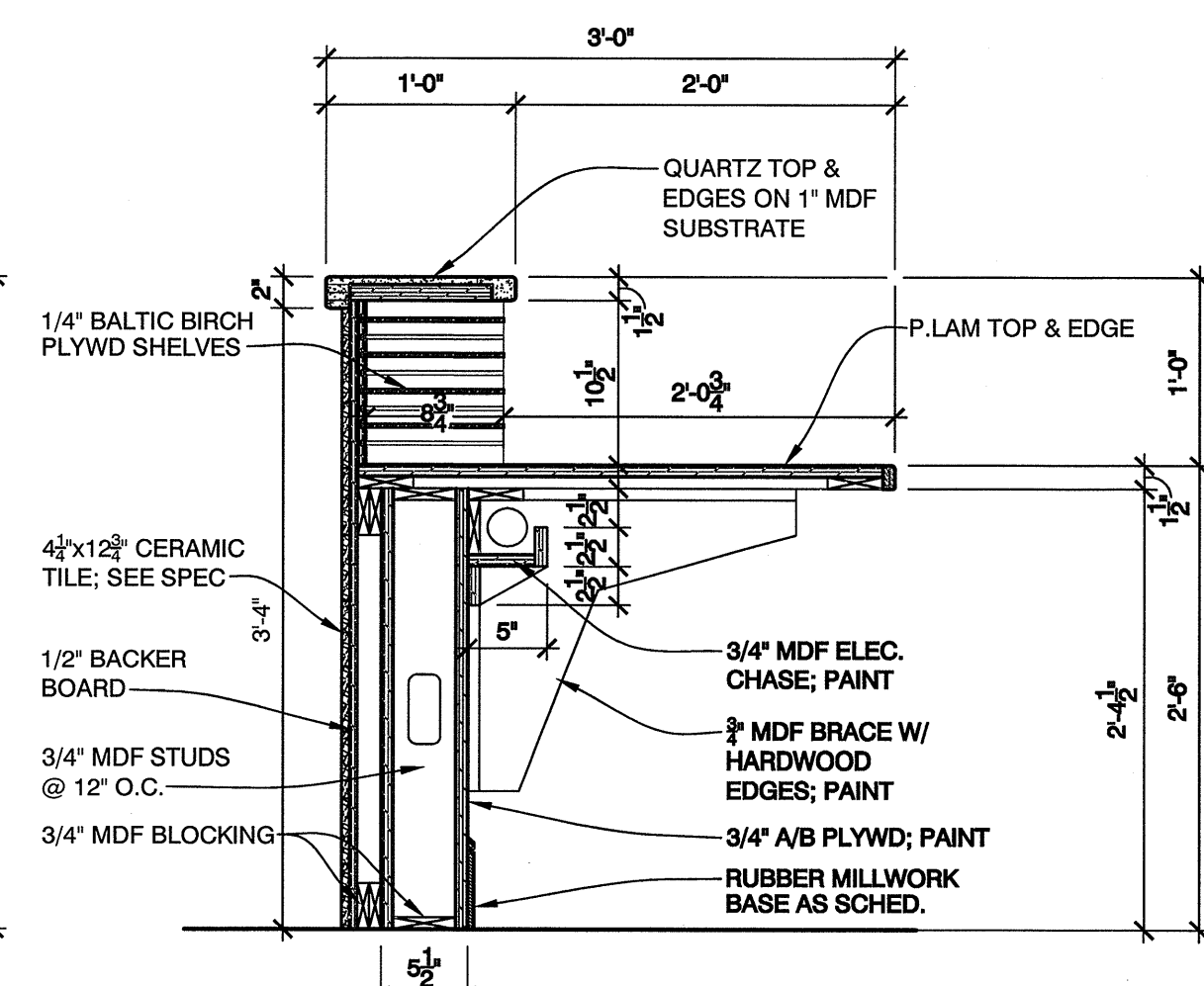
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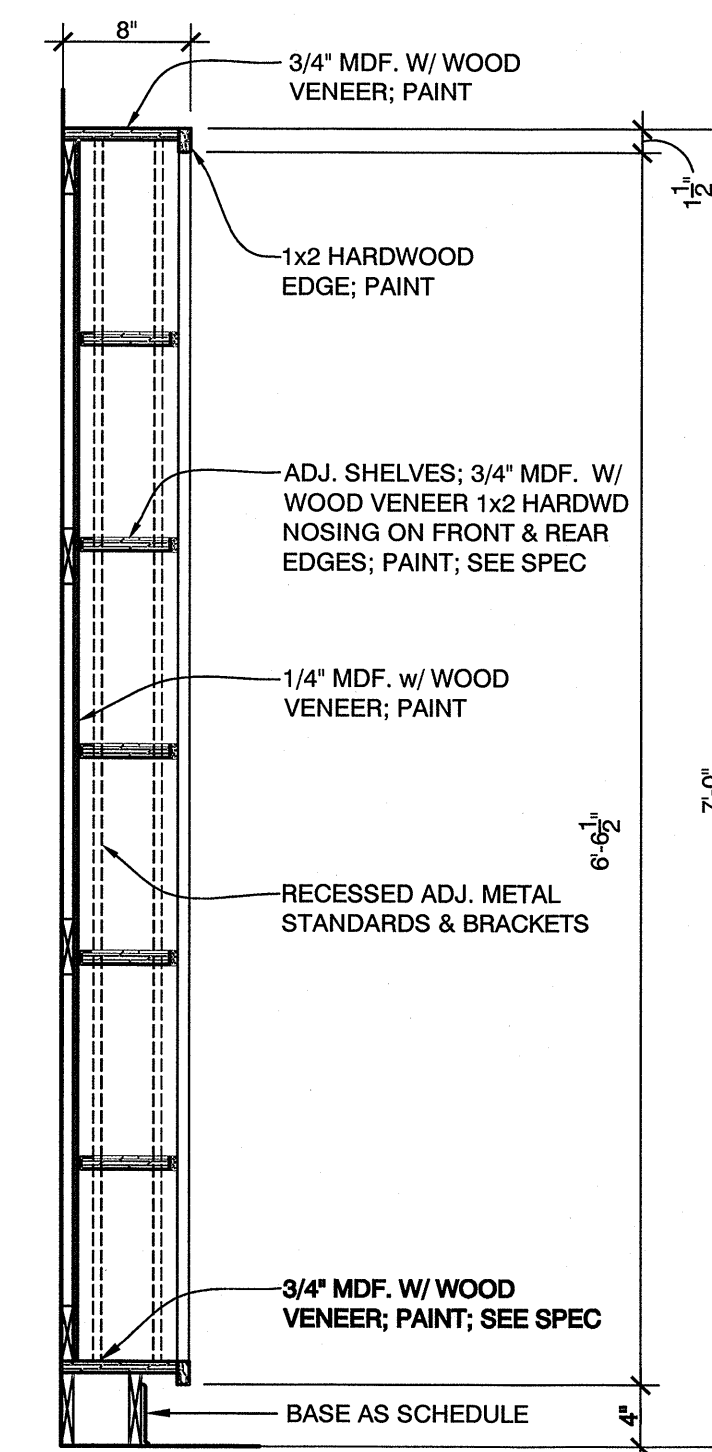
P SECTION
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Q SECTION
A6.2 1" = 1'-0"



R SECTION
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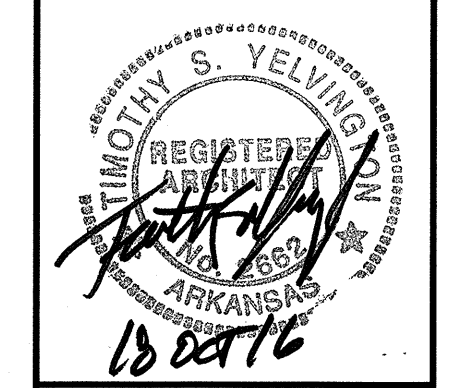


S SECTION
A6.2 1" = 1'-0"

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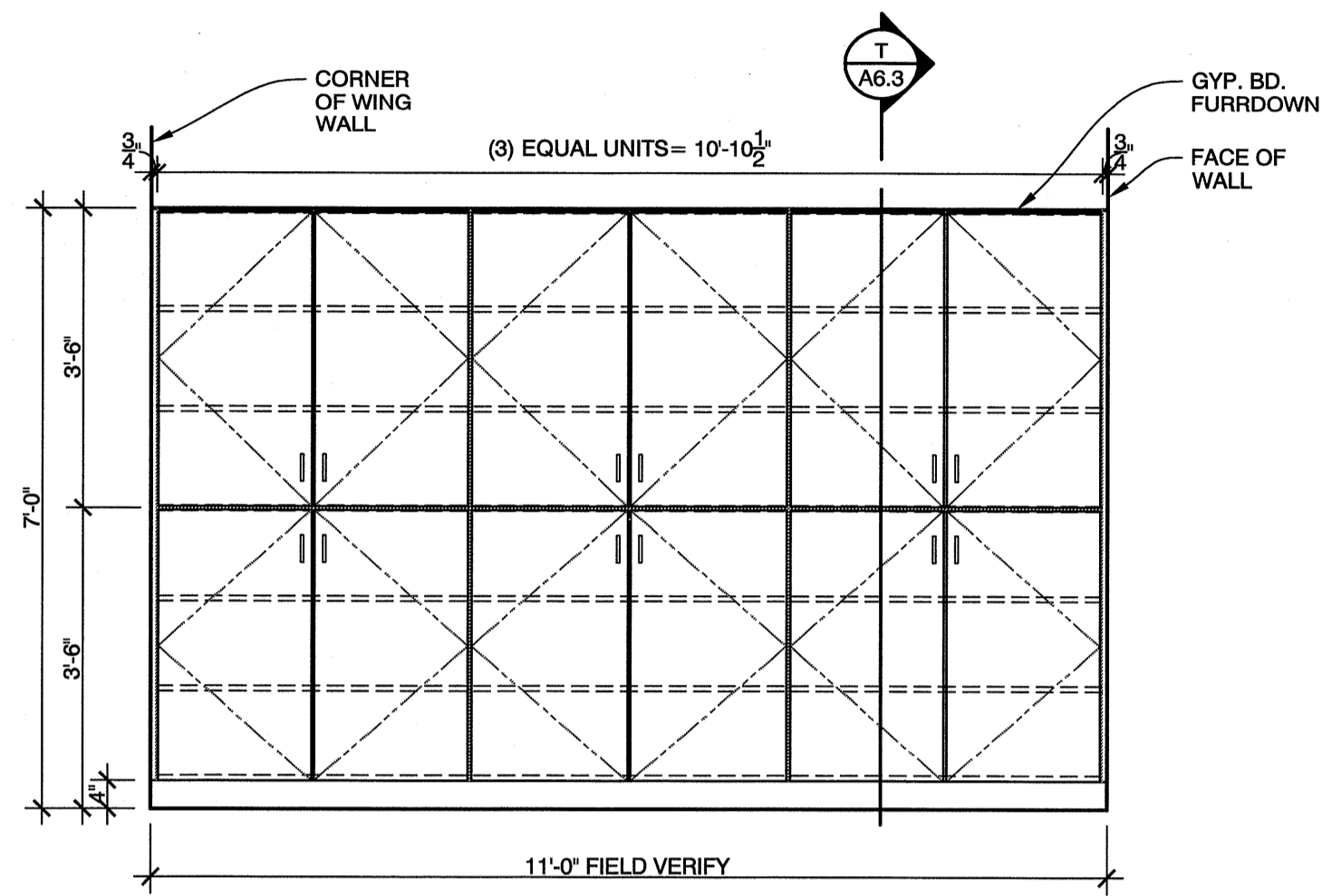


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| ADDENDUM 4 | 5/31/16 |
| REVISIONS | DATE |

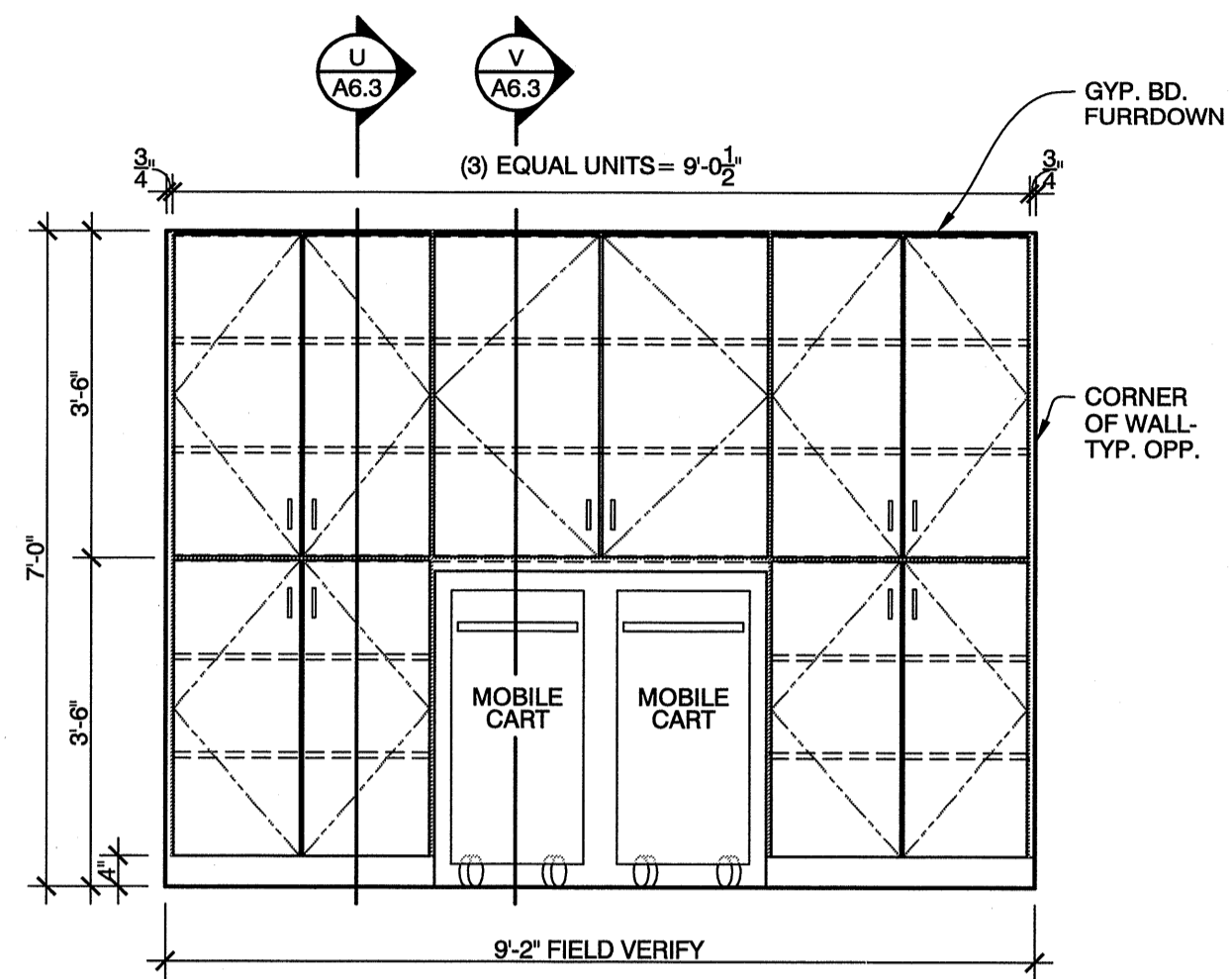
MILLWORK SECTIONS



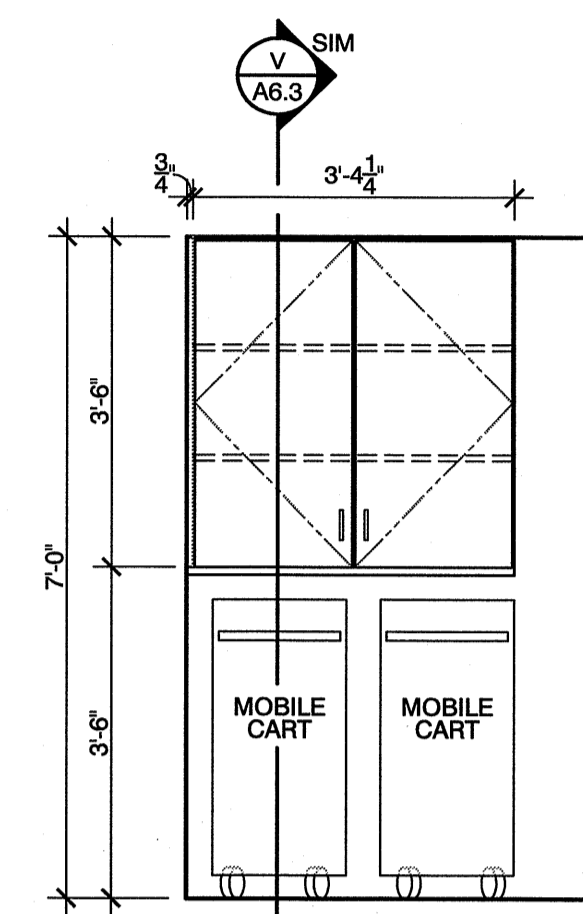
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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A6.2 | 15 |
| SHEET | OF |



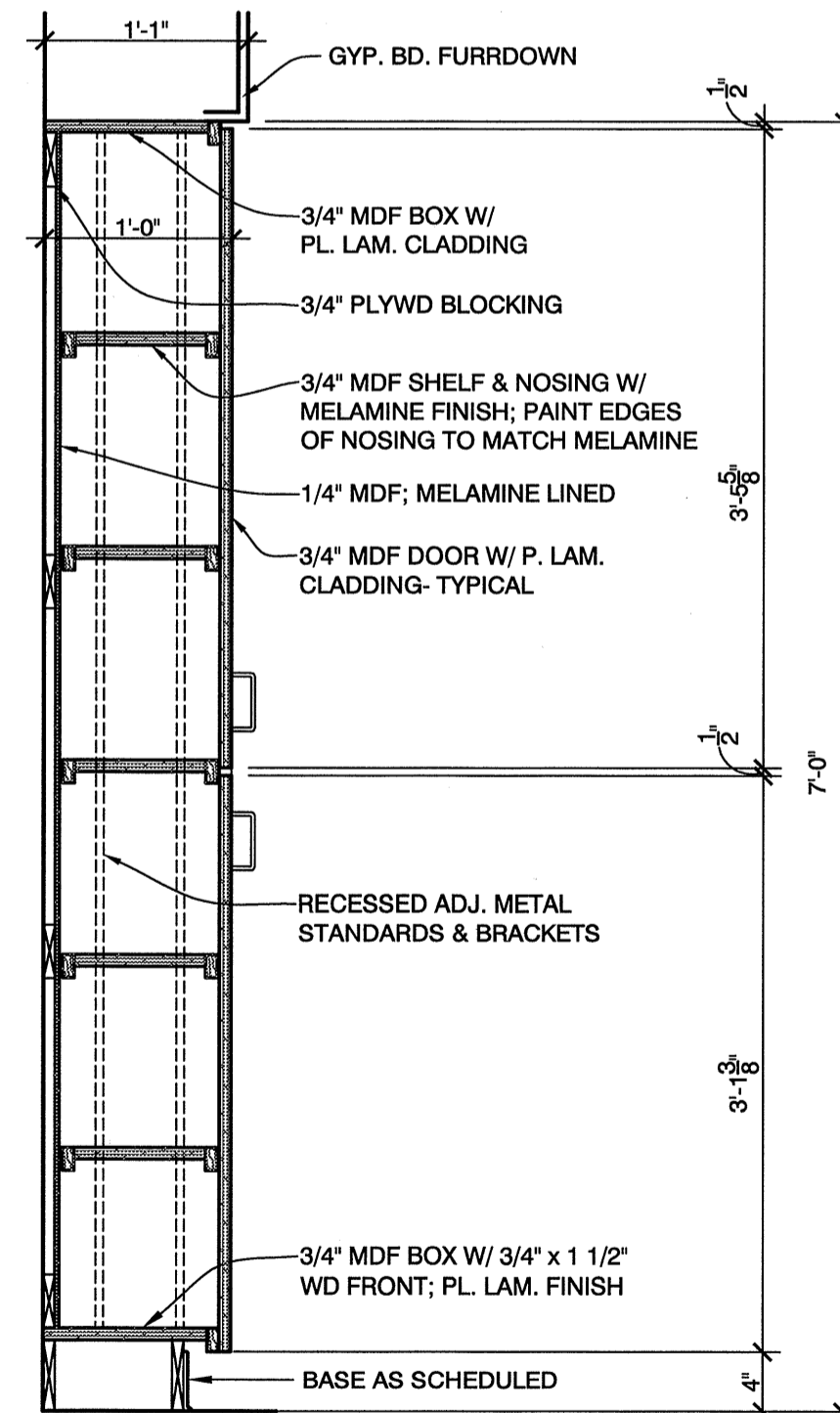
H CORRIDOR 123
1/2" = 1'-0"



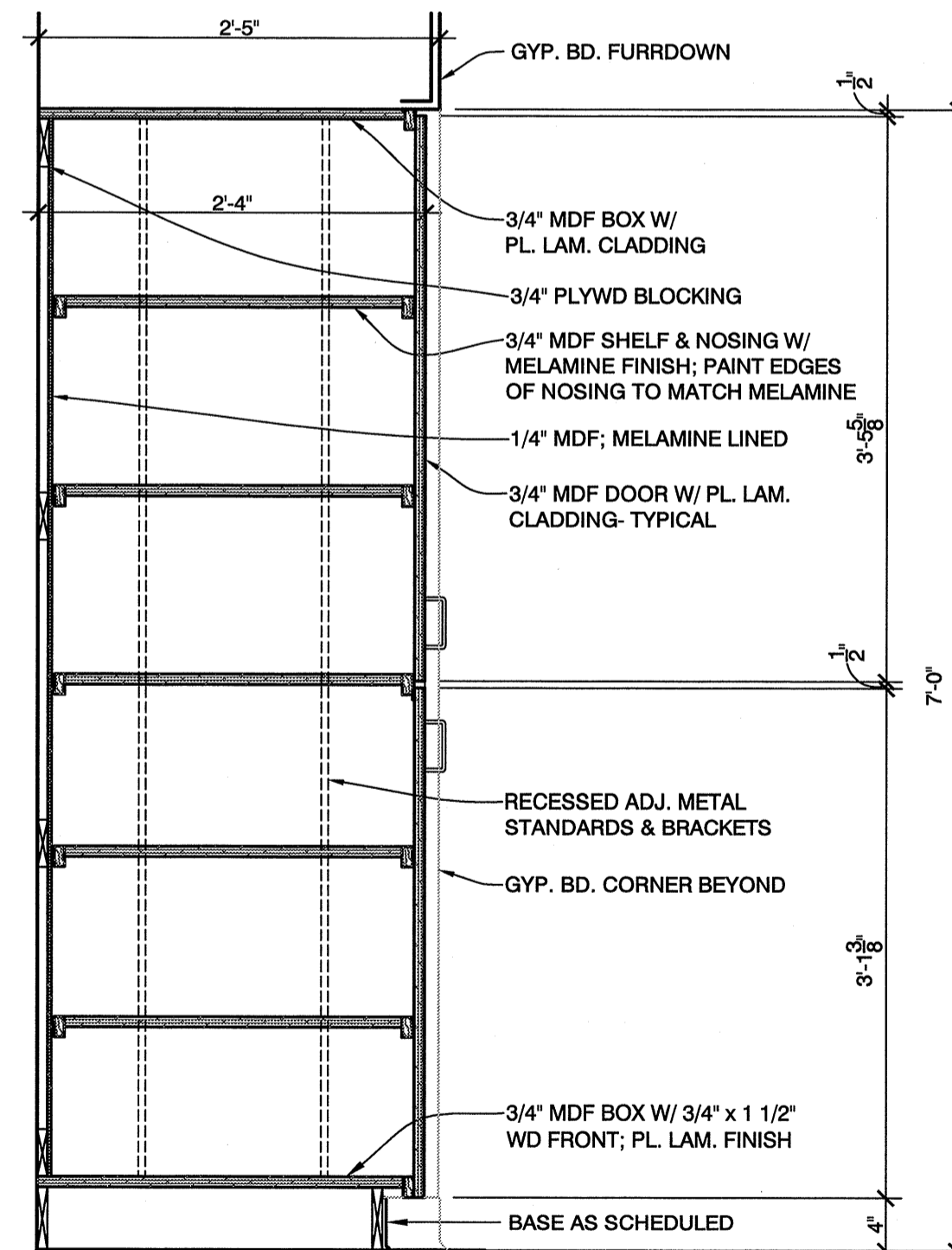
J CORRIDOR 116
1/2" = 1'-0"



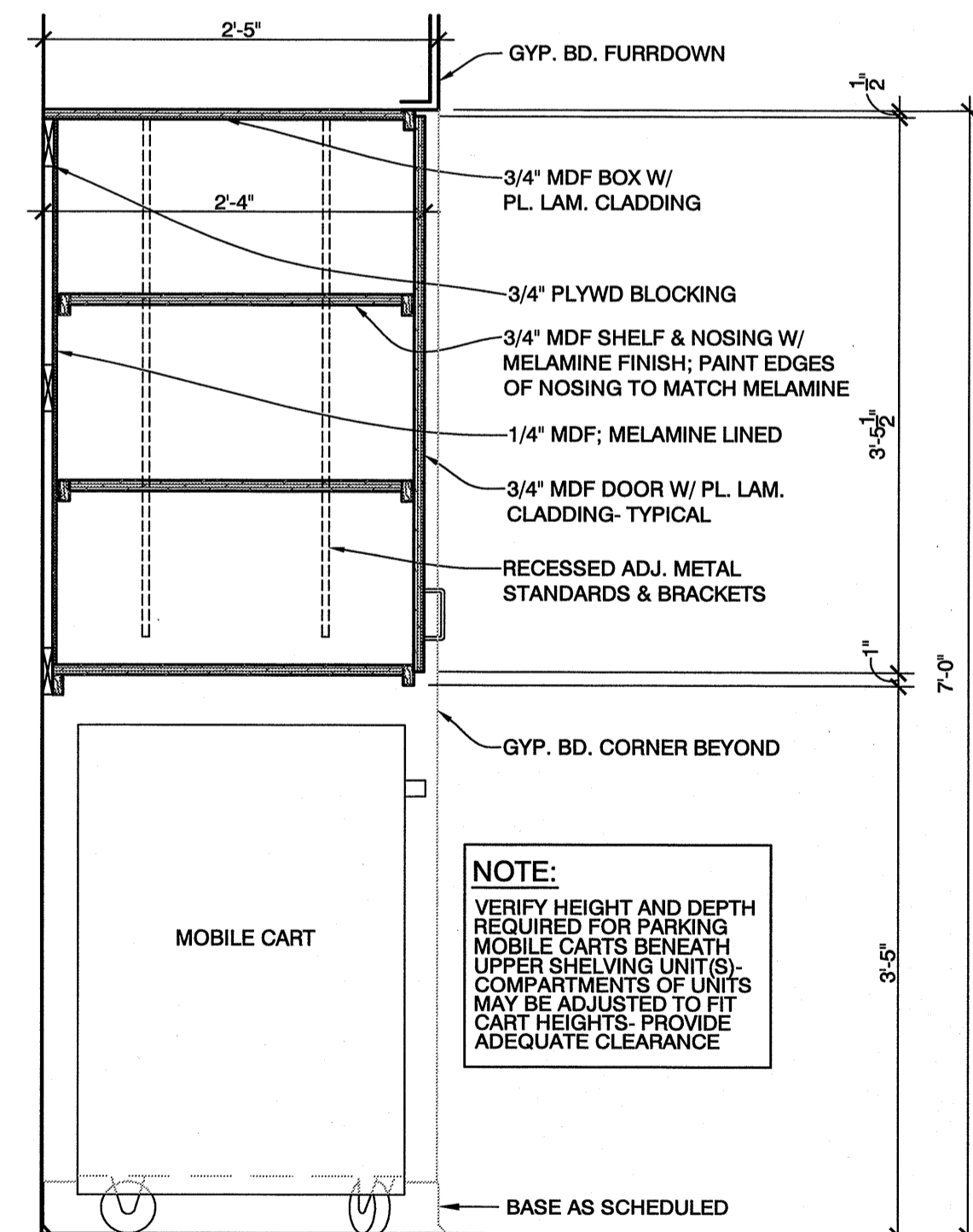
K STERILIZATION, RESUPPLY & STOR. 125
1/2" = 1'-0"



T SECTION
1" = 1'-0"



U SECTION
1" = 1'-0"



V SECTION
1" = 1'-0"

NOTE:
VERIFY HEIGHT AND DEPTH REQUIRED FOR PARKING MOBILE CARTS BENEATH UPPER SHELVING UNIT(S). COMPARTMENTS OF UNITS MAY BE ADJUSTED TO FIT CART HEIGHTS- PROVIDE ADEQUATE CLEARANCE



ADDENDUM 4 5/31/16

REVISIONS DATE

MILLWORK ELEVATIONS AND SECTIONS



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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A6.3 | 15 |
| SHEET | OF |

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Dental Clinic & Shell Building for
Dr. Clint Fulks
 Highway 5 Bryant, Arkansas



| REVISIONS | DATE |
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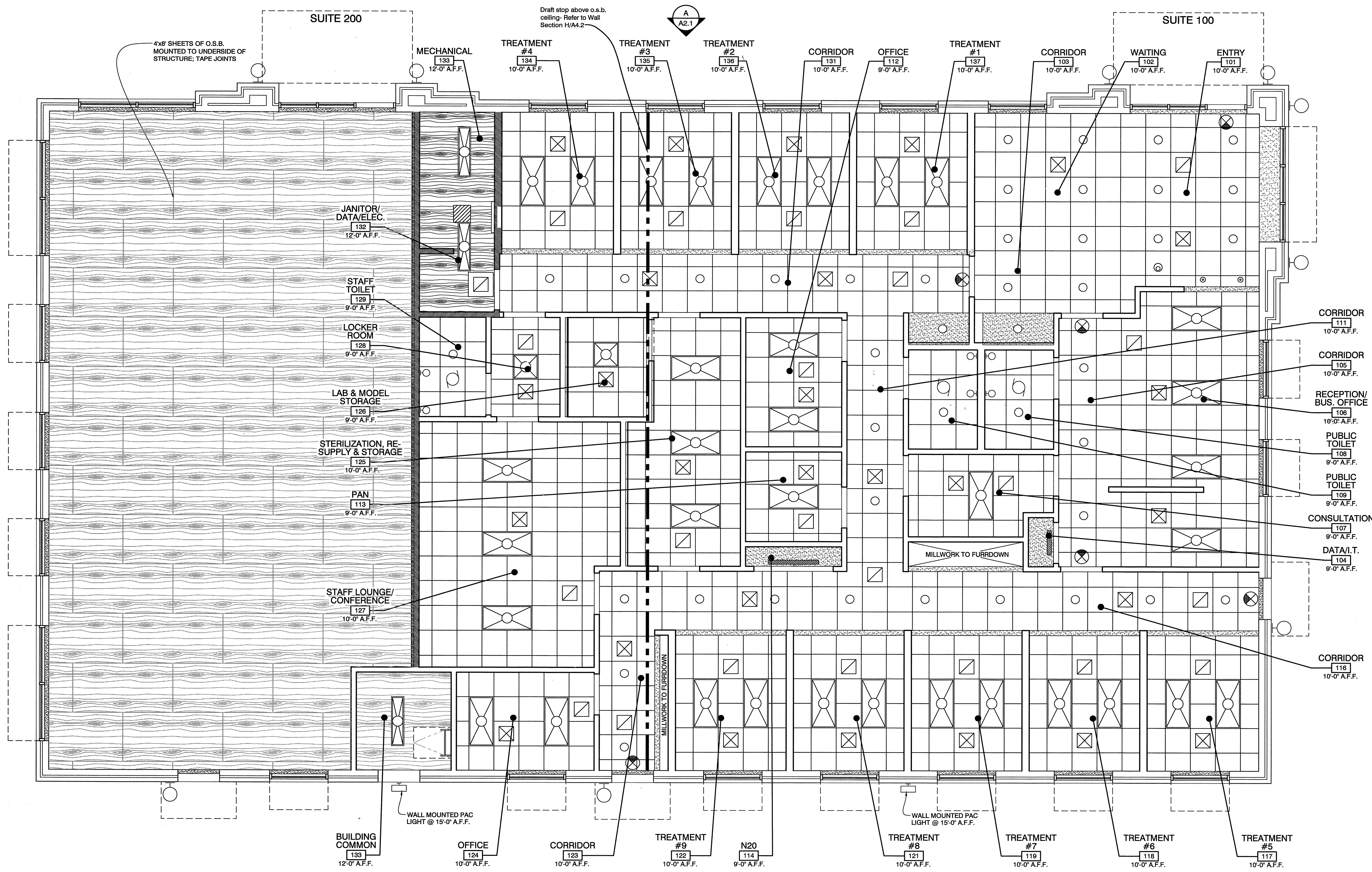
REFLECTED CEILING PLAN



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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A7.1 | 15 |
| SHEET | OF |

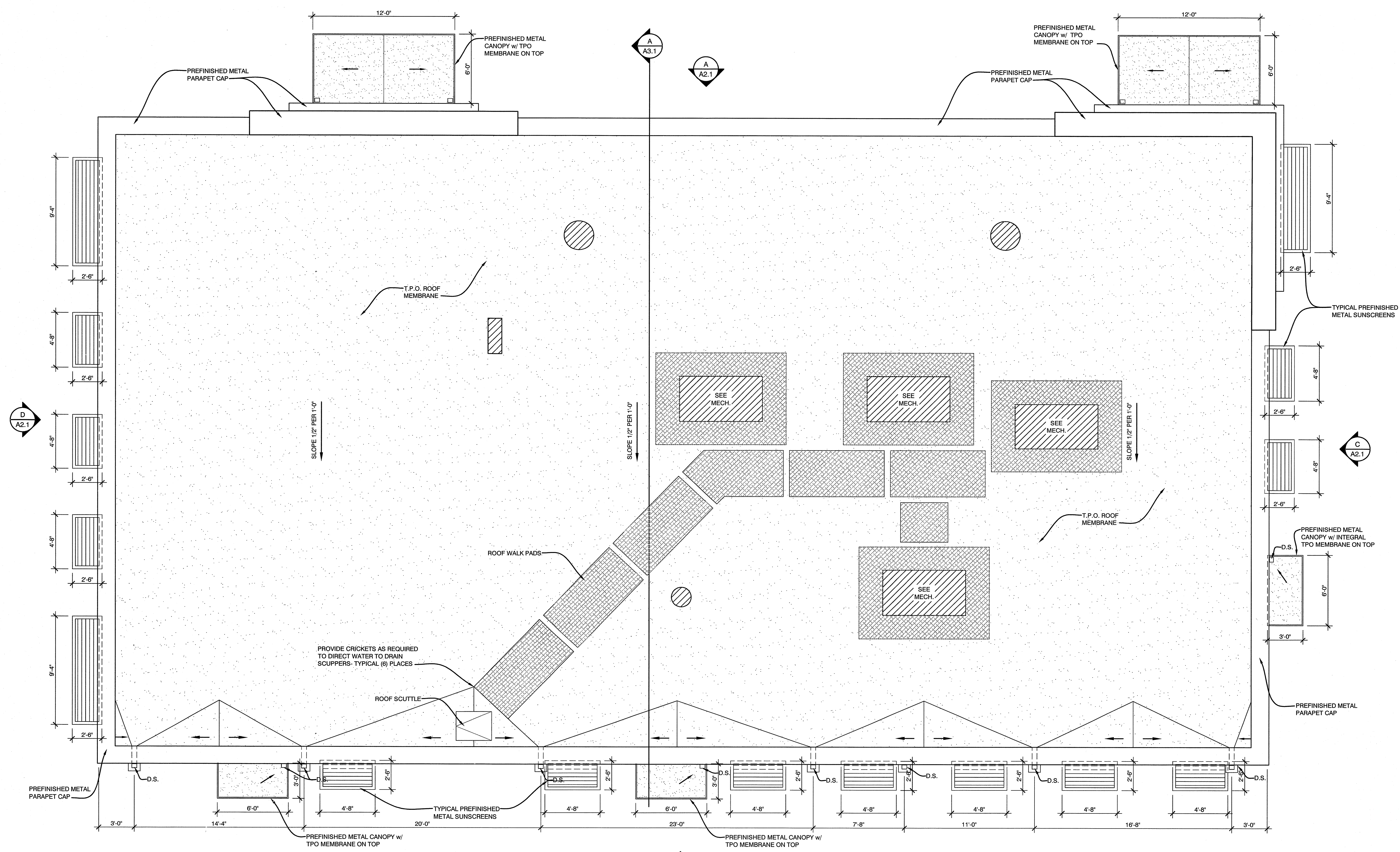
REFLECTED CEILING PLAN LEGEND

| | |
|------------|---|
| OFFICE 121 | ROOM NAME & NUMBER |
| B/A10 | SECTION NUMBER SHEET NUMBER |
| [Symbol] | SUPPLY GRILLE |
| [Symbol] | RETURN GRILLE |
| [Symbol] | EXHAUST FAN |
| [Symbol] | CLG VENT |
| [Symbol] | 2'x2' L.E.D. LIGHT |
| [Symbol] | 2'x4' L.E.D. LIGHT |
| [Symbol] | 1'x4' L.E.D. LIGHT |
| [Symbol] | WALL MOUNTED LIGHT |
| [Symbol] | WALL MOUNTED PAC LIGHT |
| [Symbol] | WALL MOUNTED LIGHT; SEE ELEC. |
| [Symbol] | DOWN LIGHT LIGHT SEE ELECTRICAL |
| [Symbol] | PENDANT LIGHT SEE ELECTRICAL |
| [Symbol] | ADJUSTABLE SPOT DOWN LIGHT; SEE ELEC. |
| [Symbol] | EMERGENCY EXIT LIGHT |
| [Symbol] | 2' x 2' TEGULAR ACOUSTICAL CEILING TILE |
| [Symbol] | GYP. BOARD CEILING / FURRDOWN |
| [Symbol] | O.S.B. CEILING @ BTM OF STRUCTURE |



REFLECTED CEILING PLAN
 1/4" = 1'-0"
 SUITE 100: 3,836 S.F.
 SUITE 200: 1,662 S.F.
 TOTAL: 5,498 SQ. FT.

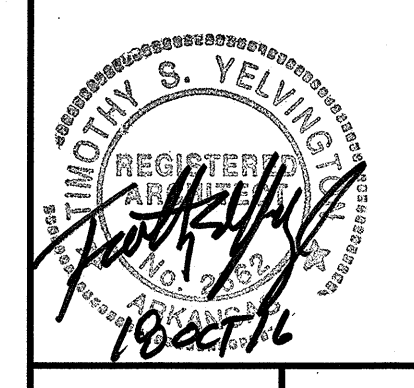
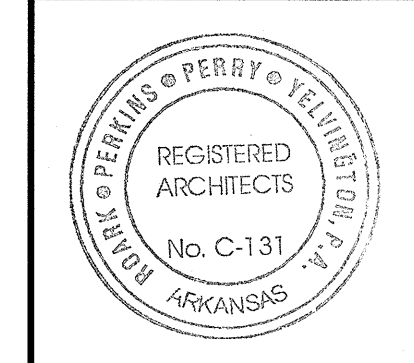
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ROOF PLAN
1/4" = 1'-0"

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Highway 5 Bryant, Arkansas



| REVISIONS | DATE |
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ROOF PLAN

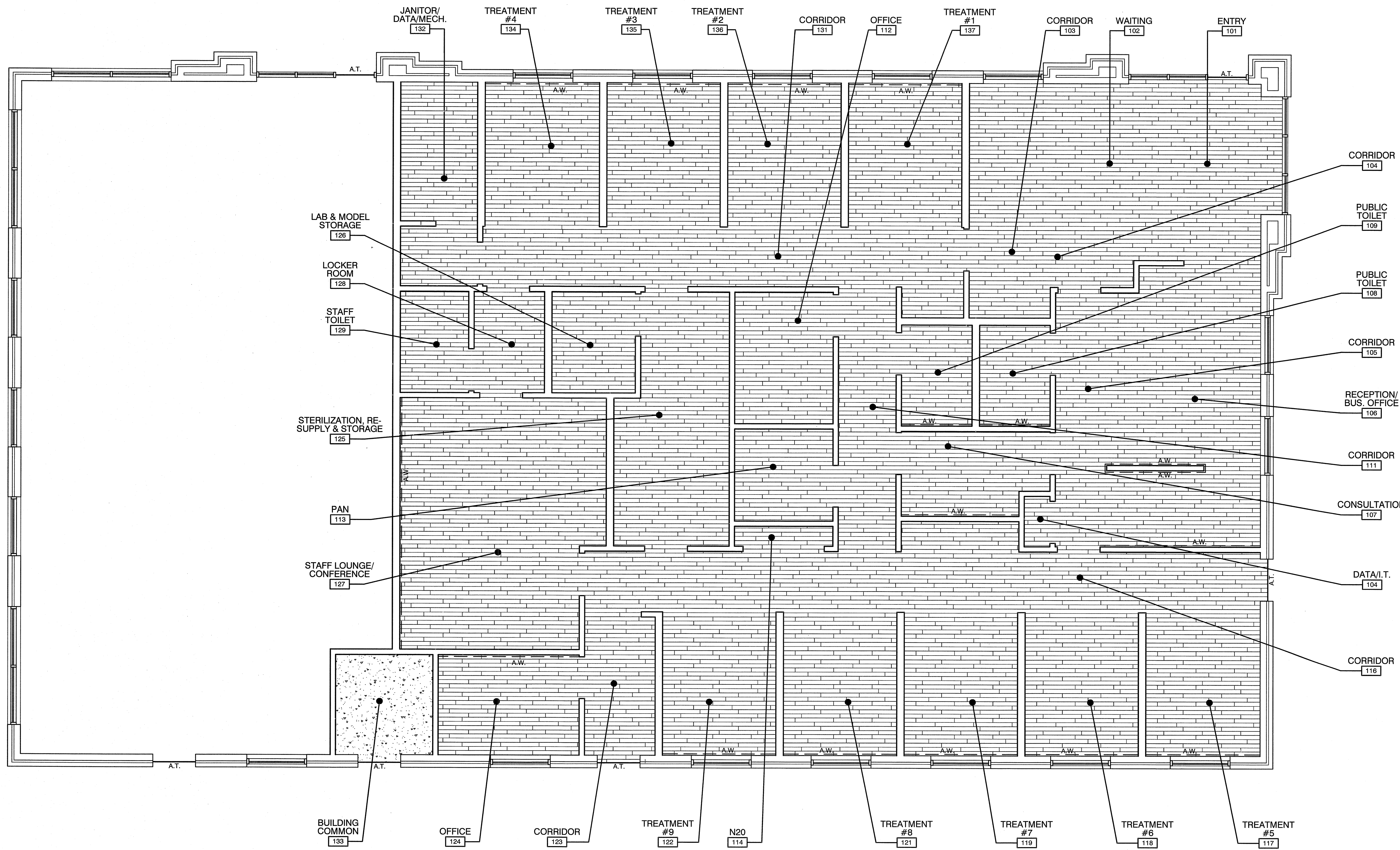


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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A8.1 | 15 |
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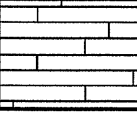

SUITE 200

SUITE 100



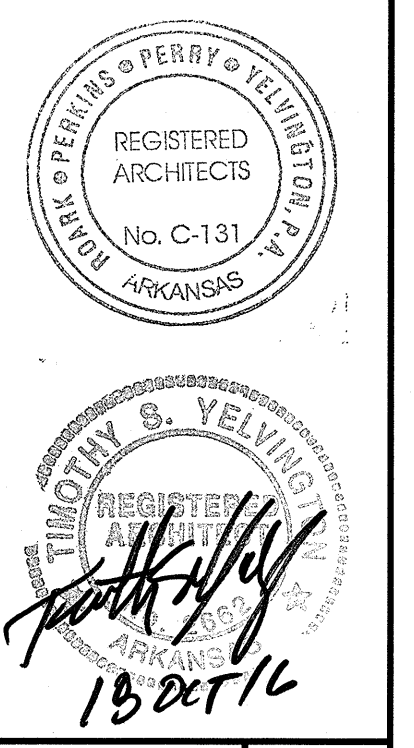
FLOOR COVERING PLAN
1/4" = 1'-0"

FLOOR COVERING PLAN LEGEND

-  FAUX WOOD FLOORING
-  SEALED CONCRETE
- R.T.S. RUBBER TRANSITION STRIP
- A.T. ALUMINUM THRESHOLD
- A.W. ACCENT WALL

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LITTLE ROCK, AR 72202
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Dental Clinic & Shell Building for
Dr. Clint Fulks
Highway 5 Bryant, Arkansas



| REVISIONS | DATE |
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| | |

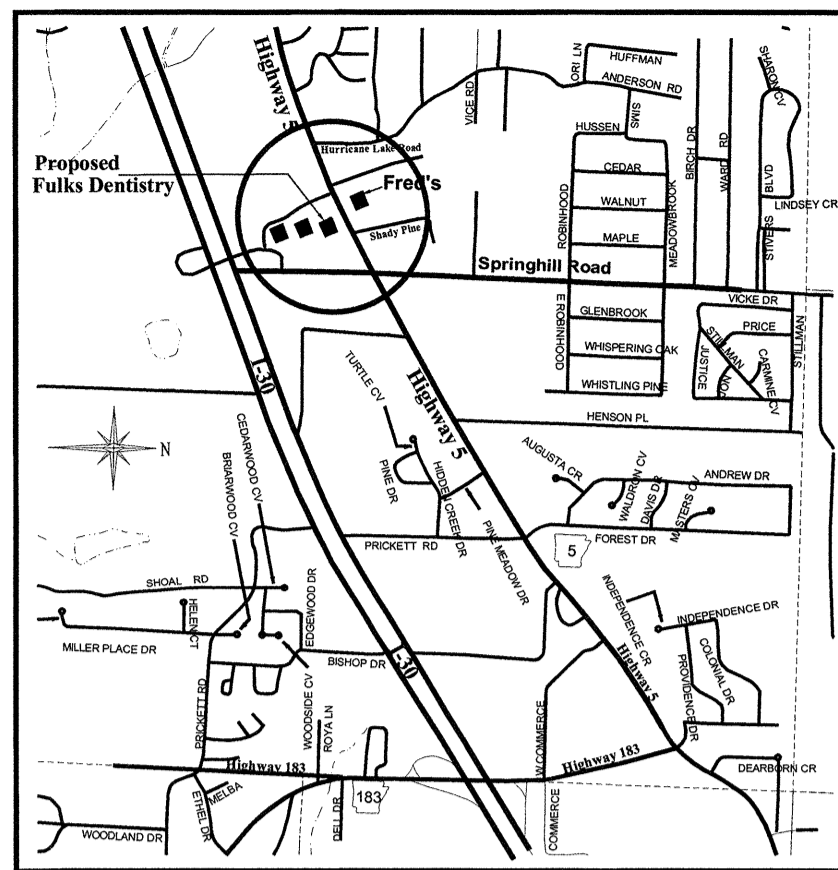
FLOOR COVERING PLAN



| | |
|------------|---------|
| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| A9.1 | 15 |
| SHEET | OF |

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| REVISED ON: | | |
|-------------|------------------|----|
| NO. | DATE OF REVISION | BY |
| 1 | 4-30-16 | CB |
| 2 | 10-28-16 | CB |
| | | |
| | | |
| | | |

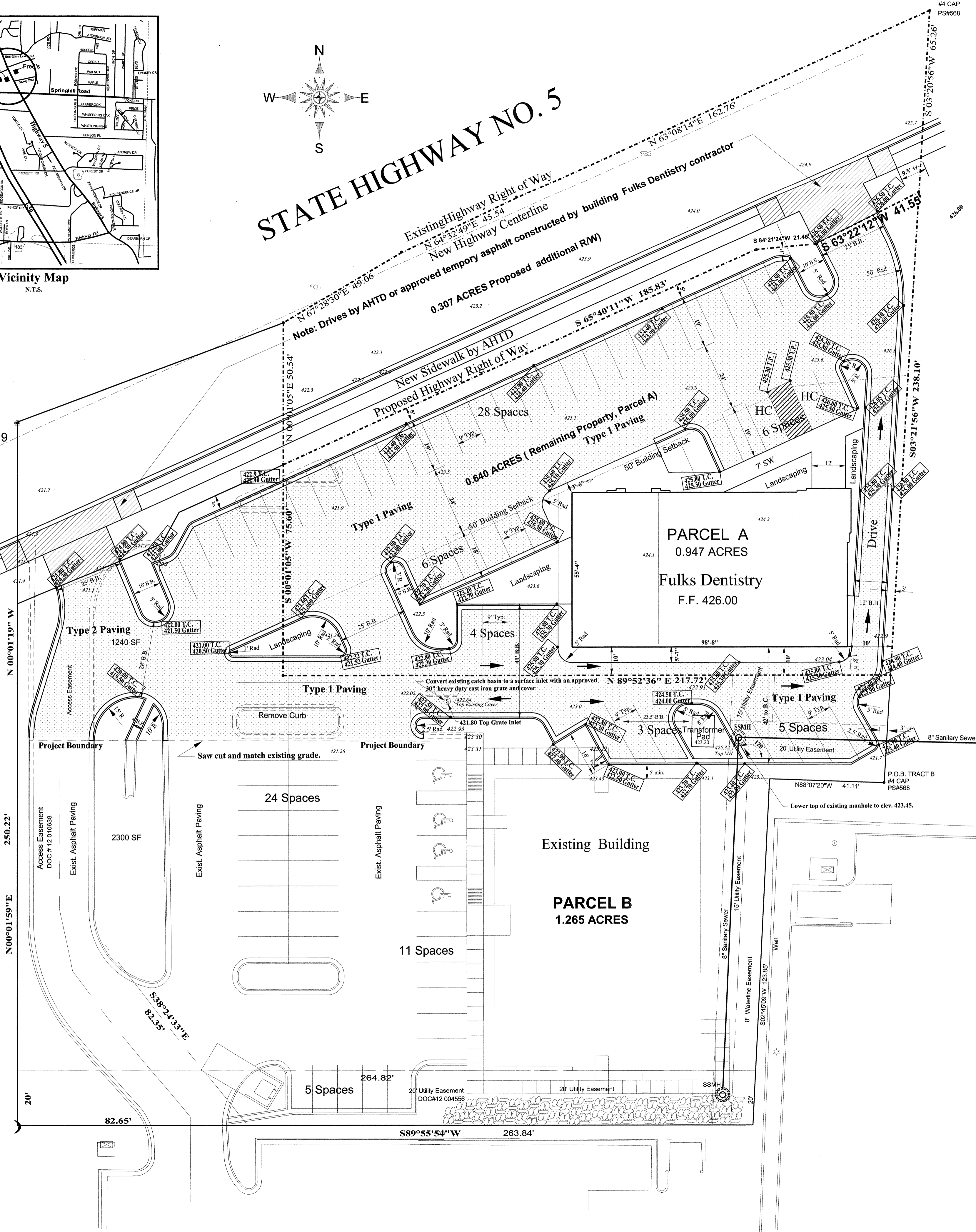


Vicinity Map
N.T.S.

STATE HIGHWAY NO. 5

Existing Highway Right of Way
New Highway Centerline
0.307 ACRES Proposed asphalt constructed by building Fulks Dentistry contractor
Note: Drives by AHTD or approved temporary asphalt constructed by building Fulks Dentistry contractor

#5 CAP
PS#1319



Legend

- * D.S. Down Spout
- Handrail
- Power Pole
- 424.3 Exst. Spot Elevations
- 424.30 Cnterline
- 424.30 Cnterline
- Sewer
- Centerline
- Water Line
- Powerline
- Proposed Curb
- Concrete
- Property Line
- Rip-Rap
- Paving

LEGAL DESCRIPTION. (PARCEL A)

THAT PORTION OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER, SECTION 20, TOWNSHIP ONE SOUTH, RANGE FOURTEEN WEST, SALINE COUNTY, ARKANSAS DESCRIBED AS FOLLOWS: COMMENCING AT A ONE HALF INCH DIAMETER REBAR INSIDE A TWO INCH DIAMETER PIPE MARKING THE SOUTHEAST CORNER OF SAID SE 1/4 OF THE SE 1/4, SECTION 20, THENCE NORTH 88°07'20" WEST, ALONG THE SOUTH LINE OF SAID SE 1/4 OF THE SE 1/4 A DISTANCE OF 778.60 FEET TO A POINT ON THE EASTERN BOUNDARY OF LAND DESCRIBED IN SALINE COUNTY RECORD DOCUMENT NO. 11-003881, SAID POINT BEING A FOUND CAP, PS NO 568; THENCE NORTH 03°21'56" EAST, ALONG EASTERN BOUNDARY OF LAND DESCRIBED IN SALINE COUNTY RECORD DOCUMENT NO. 11-003881, A DISTANCE OF 38.17 FEET TO THE POINT OF BEGINNING OF LAND HEREIN DESCRIBED; THENCE SOUTH 89°55'54" WEST, A DISTANCE OF 217.72 FEET; THENCE NORTH 00°01'55" EAST, A DISTANCE OF 132.93 FEET TO THE SOUTH RIGHT OF WAY LINE OF ARKANSAS STATE HIGHWAY NO. 5; THENCE NORTH 65°36'35" EAST, ALONG SAID SOUTH RIGHT OF WAY LINE A DISTANCE OF 254.32 FEET TO A FOUND CAP, PS NO. 568 MARKING THE NORTHEAST OF LAND DESCRIBED IN SALINE COUNTY RECORD DOCUMENT NO. 11-003881; LEAVING SAID SOUTH RIGHT OF WAY LINE, THENCE SOUTH 03°21'56" WEST A DISTANCE OF 238.10 FEET TO THE POINT OF BEGINNING, CONTAINING 0.947 ACRES, MORE OR LESS.

Paving Details

Hot Mix Asphalt Concrete (AHTD)
Hot Mix Surface Course
Class 7 Base Compacted to 92% Modified Proctor Density

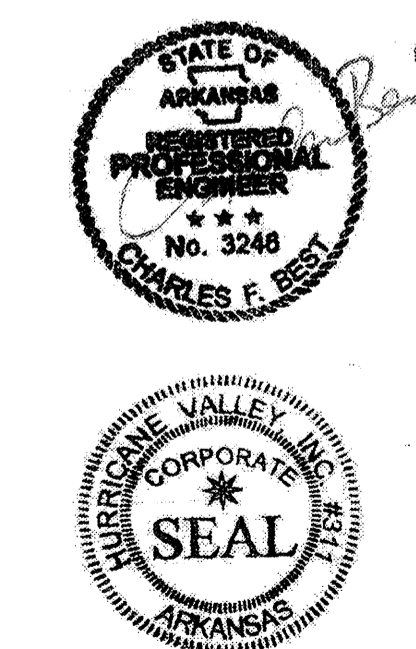
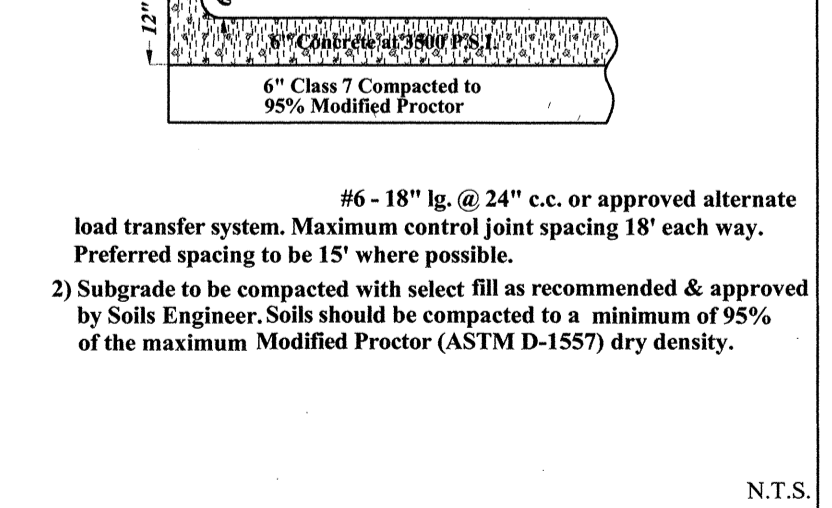
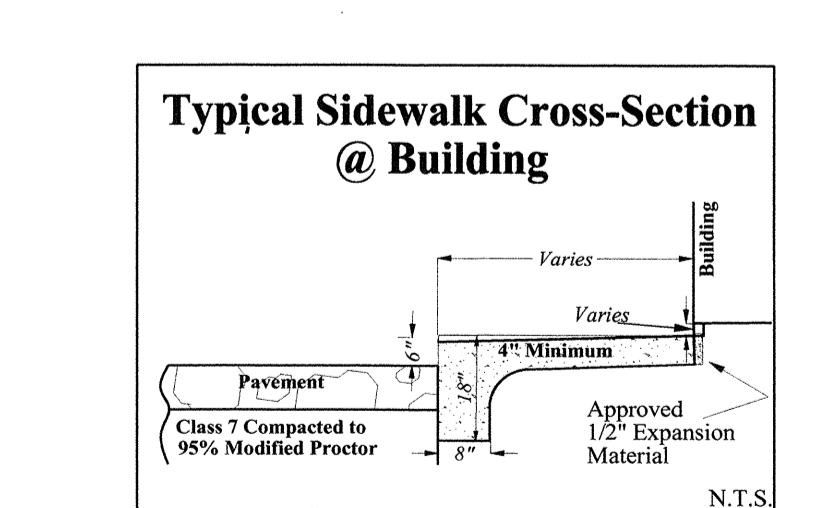
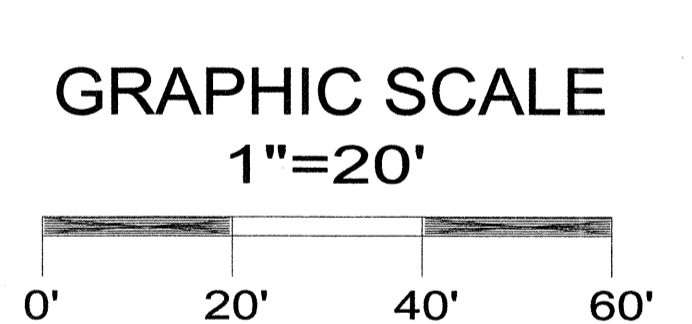
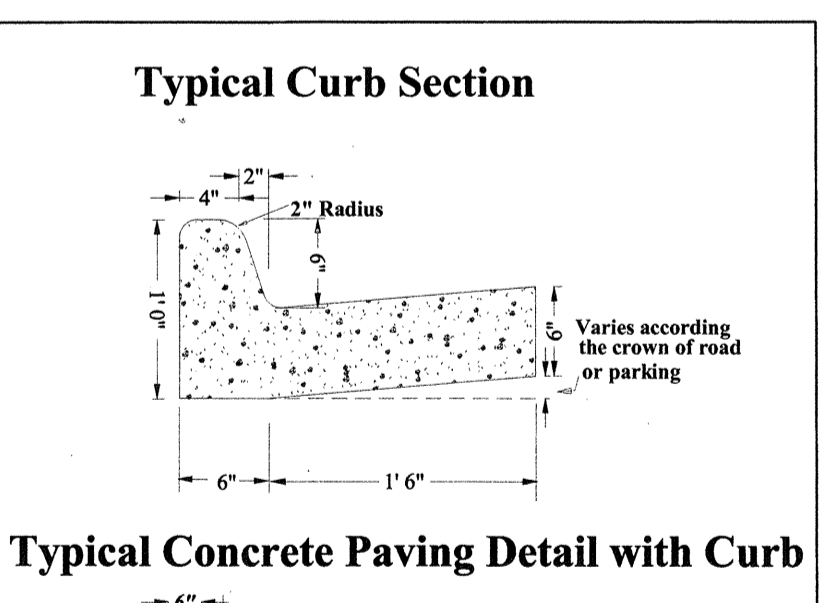
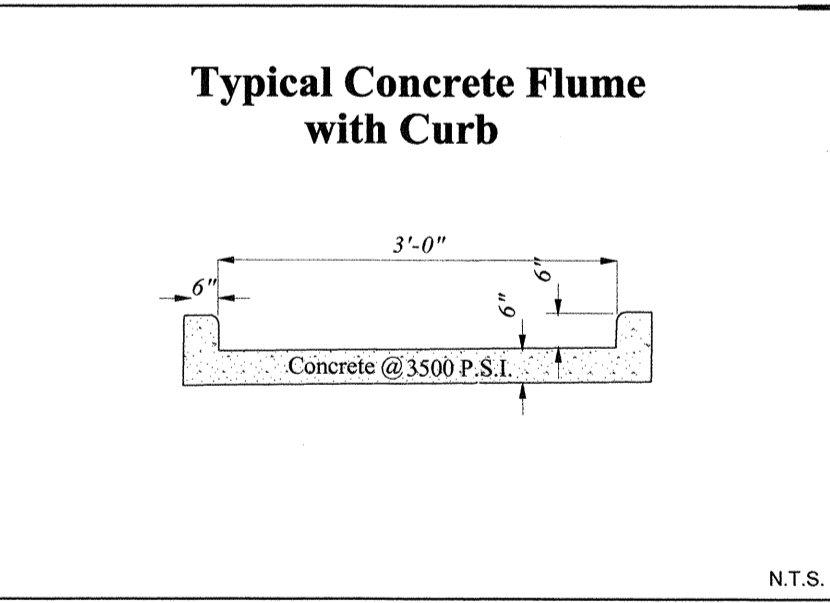
Light Traffic Asphalt Pavement
Hot Mix Asphalt Concrete (AHTD)
Hot Mix Surface Course
Class 7 Base Compacted to 92% Modified Proctor Density

Type 2 Paving Heavy Traffic Asphalt Pavement
#4 @ 18" c.c. Ea. Way
6" Concrete - 3500 P.S.I. @ 28 day concrete.
Class 7 Base Compacted to 92% Modified Proctor Density

Type 3 Paving Concrete Pavement

General Site Construction Notes:

- See Architectural Drawings for grading details at buildings.
- Finish contours and grades shown are for finished surfaces; allowances shall be made for pavements, slabs, topsoil, sod, etc. Uniform planes and surfaces shall be shaped between finished spot elevations and/or finish contours shown. Minimum pavement slopes shall be 1% minimum. Concrete curb & gutter slope shall not be less than 0.5% spill-out curb shall be used on the high side of pavement.
- The contractor shall control erosion as shown in the SWPPP.
- All areas to be cut or filled shall be cleared and grubbed. The maximum fill slope shall be 3:1. All fills shall be made in 8" lifts and compacted at optimum moisture content to 95% of modified proctor density (ASTM D-1557), as determined by in-place density tests. Fill material shall be tested and approved by the engineer prior to placement. Cut areas shall be tested and approved by the engineer prior to placement of additional subgrade material or base.
- The contractor shall coordinate with each utility company prior to any excavation. Any damage to utility lines caused by the contractor's operations shall be repaired at the contractor's expense. The contractor shall verify the horizontal and vertical alignment of existing and proposed storm sewer, sanitary sewer and water lines to ensure that they are installed with adequate cover and clearance. All rough grading shall be complete before installation of storm sewer, sanitary sewer and appurtenances, water mains, services and appurtenances. All utility trenches shall be backfilled and compacted with select material as specified in note #4 above.
- The contractor shall comply with all applicable laws, codes and ordinances governing work of this type.
- The installations of all culvert pipes are to be in accordance with City of Bryant specifications.
- All existing improvements that interfere with the work, and are not to be saved shall be removed and disposed of. The contractor shall protect improvements in the right-of-way that are to remain.
- All water mains, sewer mains and the appurtenances including installation, shall comply with the Plans and Specifications. Connections shall not be made to existing lines until new construction has been tested and approved.
- The contractor's attention is specifically called to the location of the existing improvements. The contractor shall be solely responsible for damaging any existing improvements that are to remain. Prior to submitting his bid, the contractor shall review the plans and specifications. He shall visit the site and inspect the condition of the site and the adjacent improvements.
- The contractor shall call "One-Call" for location of all utilities prior to commencement of any excavation.
- Any excess excavated material, not required for construction of fills shall be hauled off the site.
- Materials:
 - Concrete:
 - Ready-mix concrete to be used with a minimum compressive strength at 28 days of 3500 psi.
 - Unless otherwise authorized by the Engineer, the slump shall not exceed 4 inches.
 - Ready-mix concrete shall be obtained from the same approved source in order to minimize color differences in the concrete where used for sidewalks, curbing and paving.
 - Concrete Reinforcing Materials:
 - Bars shall conform to "Specifications for Deformed Billet-Steel Bars for Concrete Reinforcement", ASTM A-615, grade 60.
 - Wire fabric shall conform to "Specifications for Wire Fabric for Concrete Reinforcement", ASTM A-185.
 - Supports, Spacers and Chairs: Types which will hold reinforcement in position shown in accordance with requirements of ACI 318 except as specified.
- Saw-cut Control Joints:
 - Depth of cut: 1/2 of slab thickness
 - Maximum spacing based upon thickness, unless noted otherwise:
 - 4-inch slab 10ft c.c. or as shown
 - 5-inch or larger slab 15ft c.c.

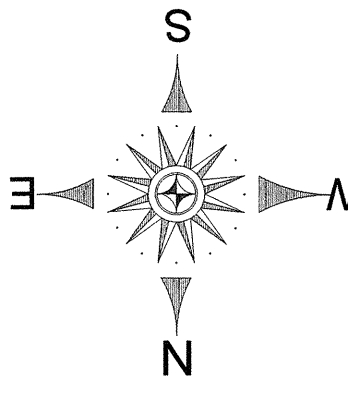
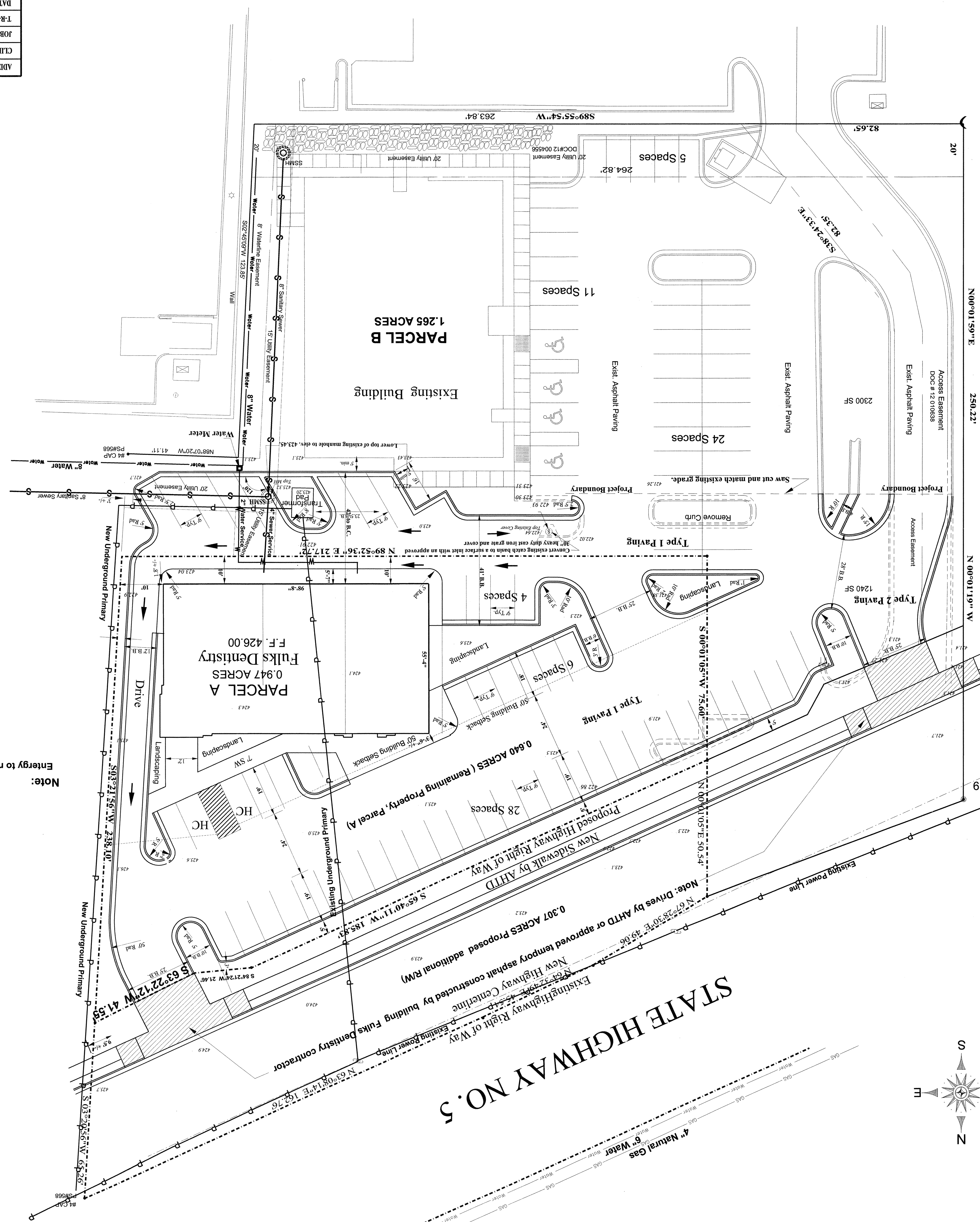


| | | | |
|----------------|------------------------------|---------|----------|
| ADDRESS | Arkansas State Highway No. 5 | DSGN BY | |
| CLIENT | Dr. Clint Fulks | DWN BY | |
| JOB # | 15013 | APPR BY | |
| T-R# | T-1-S, R-14-W, Sec. 20 | FILE | |
| DATE DWG. MADE | 1-13-2016 | SCALE | 1" = 20' |

HURRICANE VALLEY INC.
PROFESSIONAL ENGINEERING CONSULTANTS
P.O. BOX 118
BRYANT, ARKANSAS

Fulks Dentistry
Site & Grading Plan
Bryant, Arkansas

| Symbol | Description |
|---------------------|-----------------------|
| (Circle with dot) | Down Spout |
| (Circle with cross) | Handrail |
| (Circle with 'x') | Power Pole |
| (Circle with 'x') | Kyle, Spot Elevations |
| (Circle with 'x') | Trains Elevations |
| (Circle with 'x') | Sewer |
| (Circle with 'x') | Cableline |
| (Circle with 'x') | Water Line |
| (Circle with 'x') | Powerline |
| (Circle with 'x') | Proposed Curb |
| (Circle with 'x') | Concrete |
| (Circle with 'x') | Property Line |
| (Circle with 'x') | Rip-Rap |
| (Circle with 'x') | Paving |



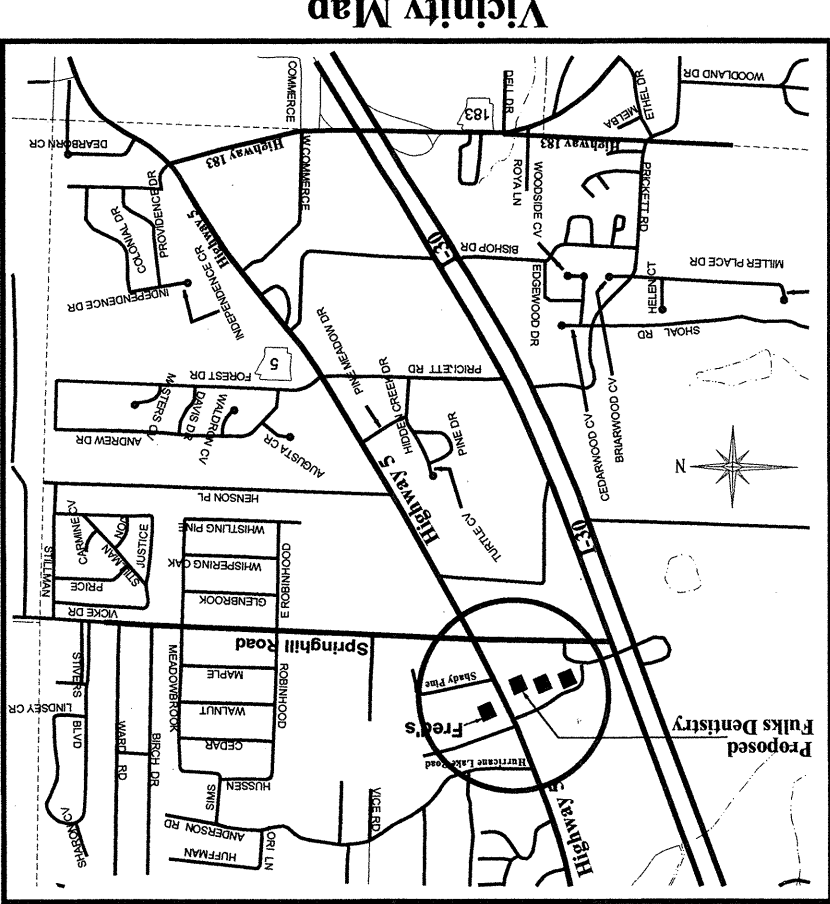
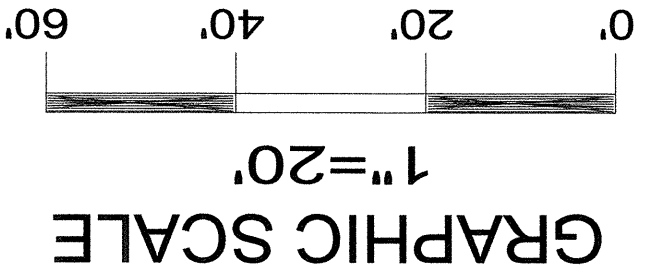
STATE HIGHWAY NO. 5

Note: Entry to relocate existing underground primary to the east boundary.

LEGAL DESCRIPTION, (PARCEL A)
 THAT PORTION OF THE SOUTHEAST QUARTER OF THE SOUTHEAST QUARTER, SECTION 20, TOWNSHIP ONE SOUTH, RANGE FOURTEEN WEST, SALINE COUNTY, ARKANSAS DESCRIBED AS FOLLOWS: COMMENCING AT A ONE HALF INCH DIAMETER REBAR INSIDE A TWO INCH DIAMETER PIPE MARKING THE SOUTHEAST CORNER OF SAID SE 1/4 OF THE SE 1/4 OF SECTION 20, THENCE NORTH 88°07'20" WEST, ALONG THE SOUTH LINE OF SAID SE 1/4 OF THE SE 1/4 A DISTANCE OF 778.60 FEET TO A POINT ON THE EASTERN BOUNDARY OF LAND DESCRIBED IN SALINE COUNTY RECORD DOCUMENT NO. 11-003881, SAID POINT BEING A FOUND CAP, PS NO 568; THENCE NORTH 03°21'56" EAST, ALONG EASTERN BOUNDARY OF LAND DESCRIBED IN SALINE COUNTY RECORD DOCUMENT NO. 11-003881, A DISTANCE OF 38.17 FEET TO THE POINT OF BEGINNING OF LAND HEREIN DESCRIBED; THENCE SOUTH 89°55'54" WEST, A DISTANCE OF 217.72 FEET, THENCE NORTH 00°15'55" EAST, A DISTANCE OF 132.93 FEET TO THE SOUTH RIGHT OF WAY LINE OF ARKANSAS STATE HIGHWAY NO. 5; THENCE NORTH 65°36'35" EAST, ALONG SAID SOUTH RIGHT OF WAY LINE A DISTANCE OF 254.32 FEET TO A FOUND CAP, PS NO. 568 MARKING THE NORTHEAST OF LAND DESCRIBED IN SALINE COUNTY RECORD DOCUMENT NO. 11-003881; LEAVING SAID SOUTH RIGHT OF WAY LINE, THENCE SOUTH 03°21'56" WEST A DISTANCE OF 238.10 FEET TO THE POINT OF BEGINNING, CONTAINING 0.947 ACRES, MORE OR LESS.

General Site Construction Notes:

- See Architectural Drawing for grading details at building.
- Finish contours and grades shown are for finished surfaces; allowances shall be made for pavements, slabs, topsoil, sod, etc. Uniform planes and surfaces shall be shaped between finished spot contours shown. Minimum pavement slopes shall be 0.5%.
- The concrete shall be compacted on the high side of pavement.
- Concrete shall be placed in 6" lifts and compacted at optimum moisture content to 95% of modified proctor density (ASTM D1557), as determined by in-place density tests.
- All lifts shall be made in 8" lifts and compacted at optimum moisture content to 95% of modified proctor density (ASTM D1557), as determined by in-place density tests.
- Material shall be tested and approved by the engineer prior to placement.
- Crack relief joints shall be placed at intervals not to exceed 12 feet.
- The contractor shall coordinate with each utility company prior to any excavation, and shall be responsible for the location of all utilities prior to commencement of any excavation.
- All existing improvements that interfere with the work, and are not to be saved shall be removed and disposed of. The contractor shall protect improvements in the right-of-way that are to remain.
- All water mains, sewer mains and the appurtenances including installation, shall comply with the Plans and Specifications. Connections shall not be made to existing lines until new construction has been tested and approved.
- The contractor shall be specifically called to the location of the existing improvements. Prior to submitting this bid the contractor shall review the plans and specifications, and inspect the condition of the site and the adjacent improvements.
- The contractor shall be solely responsible for locating any existing improvements that are to remain. Excavation.
- Any excess excavated material, not required for construction or fills shall be hauled off the site.
- Material.
- Concrete.
- Ready-mix concrete to be used with a minimum compressive strength at 28 days of 3500 psi.
- Ready-mix concrete shall be obtained from the same approved source in order to minimize color differences in the concrete where used for sidewalks, curbing and paving.
- Concrete Reinforcing Materials.
- Bars shall conform to "Specifications for Deformed Billet-Steel Bars for Concrete Reinforcement," ASTM A-615, grade 60.
- Concrete Reinforcing Materials shall conform to "Specifications for Concrete Reinforcement," ASTM A-188.
- Supports, Spacers and Chairs: Types which will hold reinforcement in position shown in accordance with requirements of ACI 318 except as specified.
- Saw-cut control joints.
- Maximum spacing, unless noted otherwise, 10ft c.c. or as shown.
- 5-inch or larger slab 15ft c.c.
- 2.5-inch or larger slab 15ft c.c.



| | | | |
|----------------|------------------------------|---------|----------|
| DATE DWG. MADE | 12-09-2016 | SCALE | 1" = 20' |
| T-R-S | T-1-S, R-1-W, Sec. 20 | FILE | |
| JOB # | 15013 | APPR BY | |
| CLIENT | Dr. Clint Fulks | DWN BY | |
| ADDRESS | Arkansas State Highway No. 5 | DSGN BY | |

| | |
|--------------------------------------|--|
| DWG. NO. | |
| PROFESSIONAL ENGINEERING CONSULTANTS | |
| P.O. BOX 118 | |
| BRYANT, ARKANSAS | |
| PAKX: 501-847-2491 | |

HURRICANE VALLEY INC.
PROFESSIONAL ENGINEERING CONSULTANTS
 P.O. BOX 118
 BRYANT, ARKANSAS
 PAKX: 501-847-2491

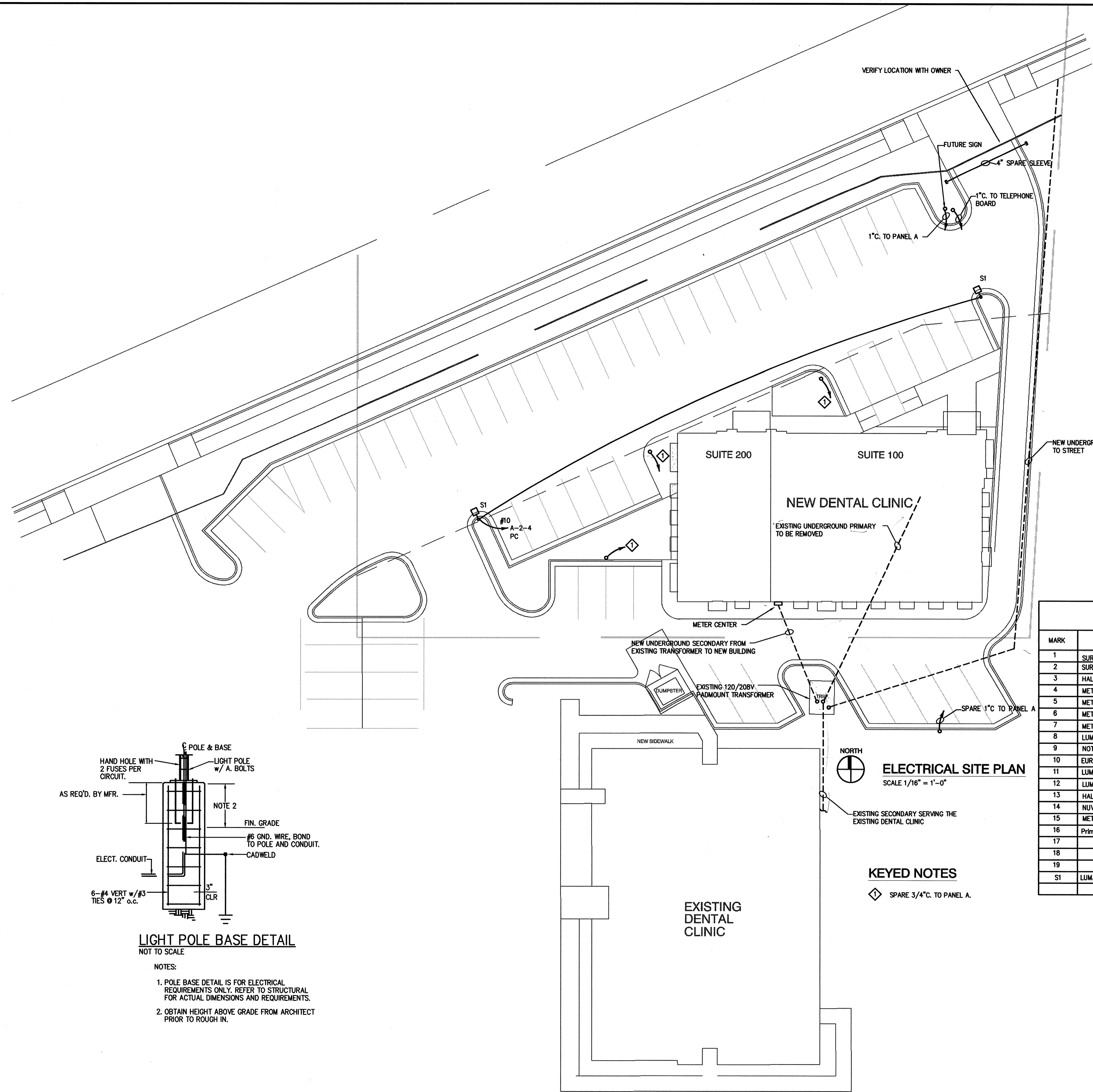
Fulks Dentistry
Utility Plan
 Bryant, Arkansas

SHEET **C2** OF 1

1 OF 1

| | |
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| NO. | DATE OF REVISION |
| | |

M:\Jobs\RPY\Dr. Clint Fulks Dental1 Clinic 2016-01\16TH SCALE 2016-01\E1.01 SITE PLAN.dwg Thu Oct 13 13:01:12 2016



ELECTRICAL LEGEND

| | | | | |
|-------------|---|----------------|---|--|
| WALL OUTLET | ⊙ | CEILING OUTLET | ⊙ | OUTLET (NO. REFERS TO FIXT. SCHED.) |
| ⊙ | ⊙ | ⊙ | ⊙ | LAMP HOLDER AND 100W. LAMP W/GUARD |
| ⊙ | ⊙ | ⊙ | ⊙ | *J* BOX AND CONNECT EQUIPMENT AS REQ'D. |
| ⊙ | ⊙ | ⊙ | ⊙ | EXIT LIGHT - SINGLE FACE W/ BATTERY - FIXTURE TYPE 1 |
| ⊙ | ⊙ | ⊙ | ⊙ | EXIT LIGHT - DOUBLE FACE W/ BATTERY - FIXTURE TYPE 2 |
| ⊙ | ⊙ | ⊙ | ⊙ | FLUORESCENT FIXTURE - SHADING OR AN 'E' INDICATES EMERGENCY BODINE BALLAST |
| ⊙ | ⊙ | ⊙ | ⊙ | TRACK WITH FIXTURES AS SHOWN-SEE SCHEDULE |

- DEVICE MOUNTING NOTE**
- CONFIRM THE LOCATIONS OF ALL WALL MOUNTED DEVICES SUCH AS FIRE ALARM COMPONENTS SWITCHES, ETC. WITH ARCHITECT PRIOR TO ROUGH-IN.
- ⊙ CONVENIENCE OUTLET AC- ABOVE COUNTER V.P. = WEATHERPROOF
 - ⊙ TVSS RECEPTACLE
 - ⊙ FLOOR TELEPHONE OUTLET - WALKERBOX - VERIFY FLOOR PLATE TYPE PROVIDE TWO 1" C'S TO ABOVE ACCESSIBLE CEILING OR AS INDICATED
 - ⊙ FLOOR CONVENIENCE OUTLET- WALKERBOX- VERIFY FLOOR PLATE TYPE
 - ⊙ SPECIAL PURPOSE OUTLET -(120/208V) OR AS NOTED
 - ⊙ 3/4" COUPLING FLUSH WITH FLOOR, THEN CONNECT WITH EQUIPMENT AS REQUIRED, OR RECEPTACLE.
 - ⊙ PUSH BUTTON
 - ⊙ TELEVISION OUTLET-PROVIDE RACEWAYS SAME AS FOR TELEPHONE
 - ⊙ TELECOMMUNICATION OUTLET(PHONE/DATA)-4X4 BOX W/ SINGLE GANG MUDRING. PLATE AND 3/4" TO ABOVE ACCESSIBLE CEILING. PROVIDE WIRING IF INDICATED.
 - ⊙ VIDEO DISPLAY TERMINAL-SAME AS TELEPHONE
 - ⊙ FIRE ALARM HORN/STROBE 80' A.F.F.
 - ⊙ FIRE ALARM SPEAKER/STROBE 80' A.F.F.
 - ⊙ FIRE ALARM PULL STATION 48" A.F.F.
 - ⊙ FIRE ALARM VISUAL (STROBE ONLY) 80' A.F.F.
 - ⊙ SMOKE DETECTOR D=DUCT MOUNTED
 - ⊙ HEAT DETECTOR
 - FAP----- FIRE ALARM PANEL

- ⊙ PANELS
- ⊙ MOTOR CONNECTION-PROVIDE DISCONNECTING MEANS
- ⊙ SPEAKER OUTLET
- ⊙ MICROPHONE OUTLET
- ⊙ TRANSFORMER
- CONDUIT * CEILING OR WALL (CONCEALED)- NEUTRAL, HOT & SWITCH LEG CONDUCTORS NOT SHOWN WHERE OBVIOUS. PROVIDE GROUND WIRE IN ALL COND.
- ⊙ CONDUIT * UNDER FLOOR
- ⊙ DISCONNECT SWITCH F=FUSED N=NONFUSED
- ⊙ CONTROLLER OR STARTER
- ⊙ CLOCK OUTLET 6" BELOW CEILING
- T.C. TIME CONTROL - PROVIDE 7 DAY T/C
- P.C. PHOTOELECTRIC CELL
- NL NIGHT LIGHT TWO LAMPS ONLY
- SM SQ. "D" MANUAL STARTER TYPE FG-1 OR FG-2, CLASS 2510
- S SINGLE POLE SWITCH EACH FROM INDEPENDENTLY OF OTHERS UNLESS SHOWN OTHERWISE - TYPICAL FOR ALL SWITCHES
- S4 FOUR-WAY SWITCH S2 DOUBLE POLE SWITCH
- S5 KEYED OPERATED SWITCH
- S6 PILOT LIGHT / LIGHTED TOGGLE SWITCH - REFER TO SPECIFICATIONS FOR TYPE.
- S3 THREE-WAY SWITCH
- S7 VOLUME CONTROL SWITCH OR INTERCOM CALL BUTTON - SEE RISERS.
- S8 15 MINUTE WIND UP TIMER 20 A (MARK TIME)
- S9 DIMMER PRESCOLITE

FIXTURE SCHEDULE

| MARK | MANUFACTURE & CAT. NO. | LAMP | MOUNTING, REMARKS |
|------|--------------------------------------|------|-----------------------------------|
| 1 | SURELITES EUX7R | LED | EXIT WITH BATTERY |
| 2 | SURELITES EUX7R | LED | EXIT WITH BATTERY |
| 3 | HALO PD610ED010- PDM6A840-61VC | LED | RECESSED DOWNLIGHT |
| 4 | METALUX 24SR-LD2-48-C-UNV-L840-CD1-U | LED | LAYIN 2x4 - MEDIUM WATTAGE |
| 5 | METALUX 22SR-LD2-29-C-UNV-L840-CD1-U | LED | LAYIN 2x2 |
| 6 | METALUX 24SR-LD2-64-S-UNV-L840-CD1-U | LED | LAYIN 2x4 - HIGH WATTAGE |
| 7 | METALUX 4SLSTP4040DD-UNV | LED | SURFACE 4' STRIP |
| 8 | LUMARK XTOR9ARL | LED | WALL - WALL PACK |
| 9 | NOT USED | LED | |
| 10 | EUREKA 3542 + 74042-24 HO | LED | WALL BESIDE MIRROR |
| 11 | LUMINIS 324-L56X10-120V-BZT-MT4-K35 | LED | WALL - EXTERIOR DECORATIVE SCONCE |
| 12 | LUMINIS 314/324 | LED | WALL - EXTERIOR SMALL SCONCE |
| 13 | HALO PD610ED010- PDM6A840-61WVC | LED | RECESSED - WALL WASHER |
| 14 | NUVO 62-953 | LED | SMALL PENDANT |
| 15 | METALUX 2SLSTP2040DD-UNV | LED | WALL 2' STRIP |
| 16 | Primo 55236-WH-358 36" | LED | UNDER CABINET |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| SI | LUMARK PRV-A40-D-UNV-T4-BZ | LED | SITE LIGHT |
| | | LED | SITE LIGHT |

- NOTES:**
- "E" DENOTES BODINE: B 50 WIRED TO HOT SIDE OF SWITCH.
 - SUPPORT ALL LAY-IN FIXTURES BY 2 #12 TIE WIRES TO STRUCTURE.
 - VERIFY COMPATIBILITY OF ALL FIXTURES W/ MOUNTING SURFACE PRIOR TO ORDERING.
 - ALL FIXTURES 120V UNLESS SHOWN OTHERWISE

DRAWINGS, WRITTEN MATERIAL, AND DESIGN CONCEPTS SHALL NOT BE USED OR REPRODUCED IN WHOLE OR PART IN ANY FORM WITHOUT PRIOR CONSENT OF ROARK PERKINS PERRY YELVINGTON ARCHITECTS. DO NOT SCALE DRAWINGS. USE GIVEN DIMENSIONS ONLY. IF NOT SHOWN, VERIFY DIMENSIONS WITH THE ARCHITECT. CONTRACTOR SHALL CHECK AND VERIFY ALL DIMENSIONS AND CONDITIONS AT JOB SITE.

ROARK PERKINS PERRY YELVINGTON
 ARCHITECTURE - INTERIOR DESIGN
 715 W. SECOND STREET - LITTLE ROCK, AR 72201-0287
 WWW.RPYPARTNERS.COM

Dental Clinic & Shell Building for Dr. Clint Fulks
 Highway 5 Bryant, Arkansas

STATE OF ARKANSAS
 REGISTERED PROFESSIONAL ENGINEER
 ROBERT MERRITT
 No6316
 10/13/16
 CERTIFICATE OF AUTHORIZATION
 LUCAS MERRITT & ASSOCIATES
 No227
 ARKANSAS ENGINEER

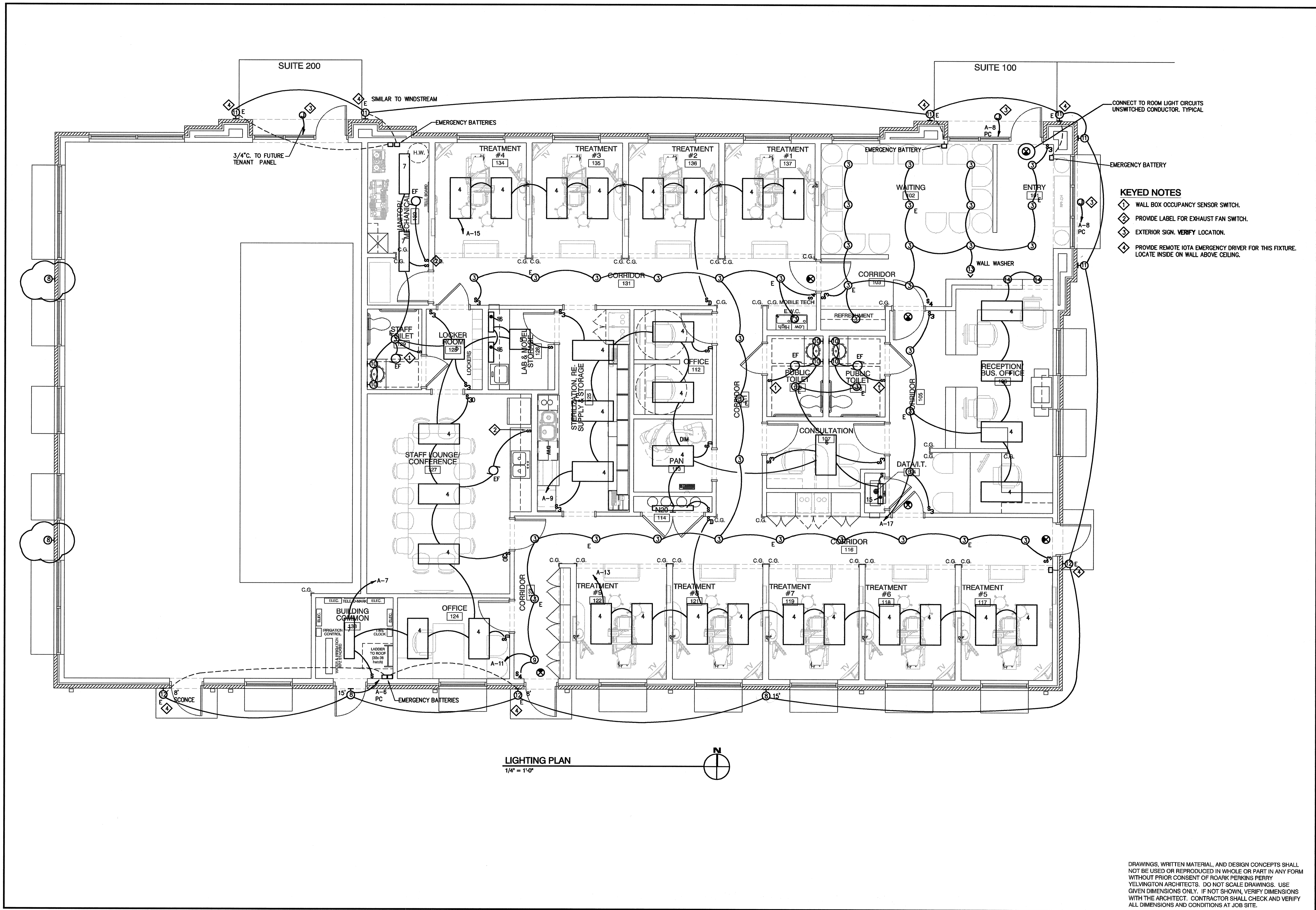
| REVISIONS | DATE |
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ELECTRICAL SITE PLAN



| | |
|----------|---------|
| 10-13-16 | 1549 |
| DATE | JOB NO. |
| E1.01 | 4 |
| SHEET | OF |

M:\Jobs\PPPY Fulks Denta1 Clinic 2016-01\A\2016-014 E2.01 LIGHTING PLAN.dwg Thu Oct 13 13:00:41 2016



LIGHTING PLAN
1/4" = 1'-0"

- KEYED NOTES**
- 1 WALL BOX OCCUPANCY SENSOR SWITCH.
 - 2 PROVIDE LABEL FOR EXHAUST FAN SWITCH.
 - 3 EXTERIOR SIGN. VERIFY LOCATION.
 - 4 PROVIDE REMOTE IOTA EMERGENCY DRIVER FOR THIS FIXTURE. LOCATE INSIDE ON WALL ABOVE CEILING.

ROARK PERKINS PERRY YELVINGTON
ARCHITECTURE - INTERIOR DESIGN
715 W. SECOND STREET - LITTLE ROCK, AR 72201-2887
(501) 525-5252
WWW.RPPYARCHITECTS.COM

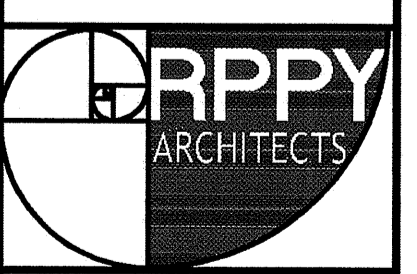
Dental Clinic & Shell Building for Dr. Clint Fulks
Highway 5 Bryant, Arkansas

STATE OF ARKANSAS REGISTERED PROFESSIONAL ENGINEER No6316 ROBERT MERRIOTT 10/13/16

CERTIFICATE OF AUTHORIZATION LUCAS MERRIOTT & ASSOCIATES No227 ARKANSAS ENGINEER

| REVISIONS | DATE |
|-----------|------|
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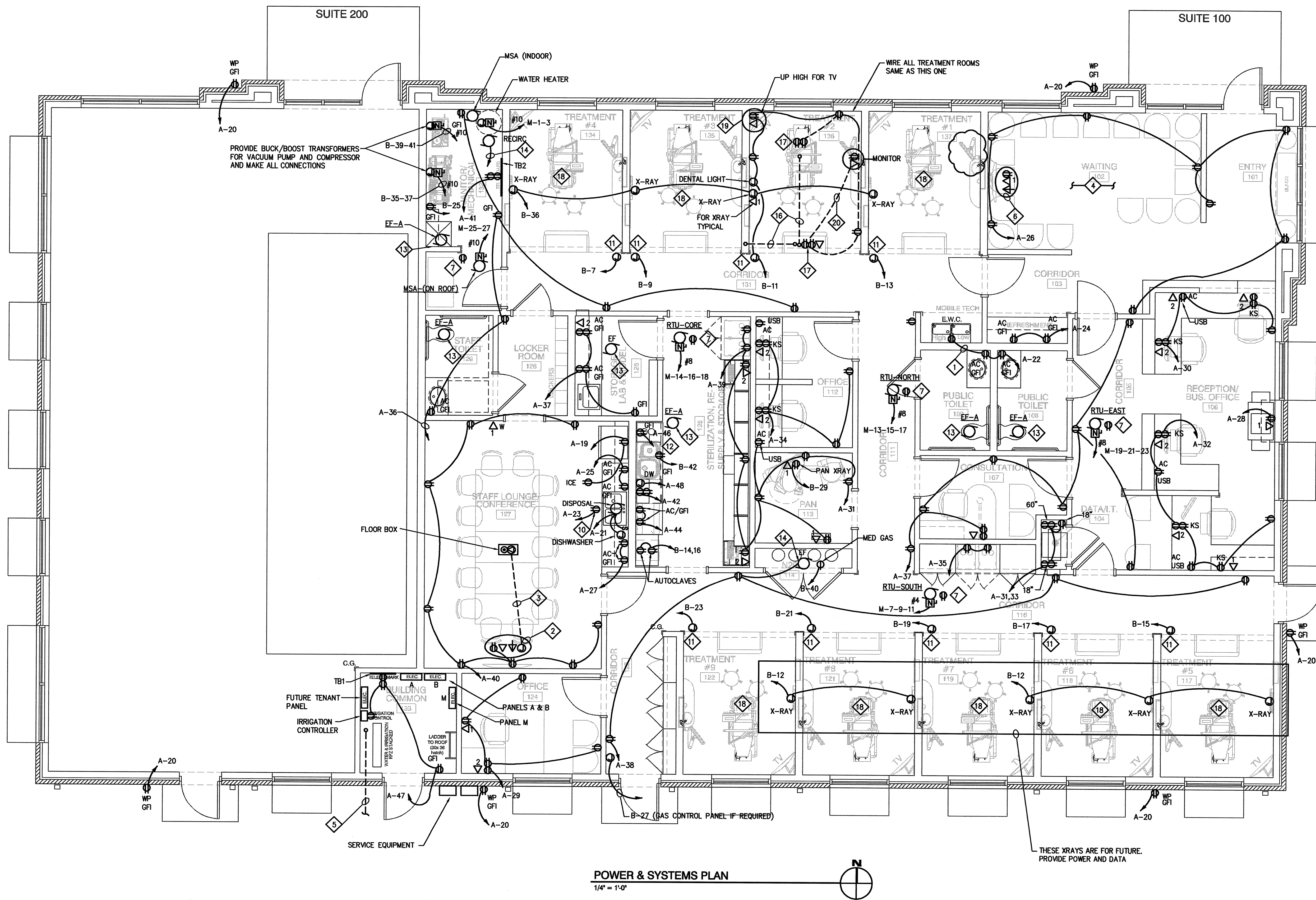
LIGHTING PLAN



| | |
|----------|---------|
| 10-13-16 | 1549 |
| DATE | JOB NO. |
| E2.01 | 4 |
| SHEET | OF |

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K:\Jobs\PPPY Dental Clinic 2016-01\2016-014 E3.01 POWER & SYSTEMS PLAN.dwg Thu Oct 13 12:46:36 2016



POWER & SYSTEMS PLAN
1/4" = 1'-0"

DENTAL EQUIPMENT NOTES
REFER TO THE DENTAL EQUIPMENT DRAWING AND PROVIDE ALL ELECTRICAL AS INDICATED. THE ELECTRICAL DRAWINGS ARE PRIMARILY SHOWING CIRCUITING. THERE ARE ADDITIONAL CONDUITS SHOWN ON THE EQUIPMENT DRAWINGS AS WELL AS SPECIFIC ROUGH-IN INSTRUCTIONS. THIS DRAWING IS FOR BID PURPOSES. OBTAIN FINAL APPROVED ROUGH-IN DRAWINGS PRIOR TO WORK.

KEYED NOTES

- 1 SLAVE FROM GFI.
- 2 WALL MOUNTED TV ABOVE. USE A "CHIEF" PAC BOX FOR RECESSED CONNECTIONS. VERIFY OUTLET HEIGHT.
- 3 HDMI CABLE IN CONDUIT UNDER SLAB.
- 4 ALL RECEPTACLES IN WAITING 102 SHALL BE TAMPER RESISTANT.
- 5 EXTEND 2" C. TO LANDSCAPE AREA FOR IRRIGATION CONTROLS.
- 6 WALL MOUNTED TV ABOVE. VERIFY OUTLET HEIGHT.
- 7 WP/GFI ON ROOF ON AC UNIT DISCONNECT. CONNECT TO CORRIDOR RECEPTACLE CIRCUIT.
- 8 NOT USED.
- 9 PROVIDE BUCK/BOOST TRANSFORMERS FOR COMPRESSOR AND VACUUM PUMP IF REQUIRED.
- 10 MICROWAVE IN CABINET ABOVE. VERIFY LOCATION.
- 11 J-BOX ABOVE CEILING FOR DENTAL EQUIPMENT POWER CIRCUITS. EXTEND CONDUITS TO CEILING WALL AND FLOOR CIRCUITS AS REQUIRED. PROVIDE ONE G.F. CIRCUIT FOR ALL OUTLETS IN DENTAL SUITE EXCEPT XRAY. CIRCUIT XRAY AS SHOWN.
- 12 ULTRASONIC. VERIFY FINAL LOCATION.
- 13 CONTROL AS SHOWN ON MECHANICAL DRAWINGS. CONNECT TO LIGHTING CIRCUIT INSTALL SPEED CONTROL FURNISHED BY MECHANICAL.
- 14 CONNECT RECIRC PUMP TO CORRIDOR LIGHTING SO THAT PUMP RUNS WHEN LIGHTING IS ON.
- 15 THIS EXHAUST FAN RUNS CONTINUOUSLY.
- 16 UNDER SLAB DATA CONDUITS. SEE DENTAL EQUIPMENT PLAN FOR DETAILS.
- 17 RECEPTACLES ON SURFACE OF FLOOR UNDERNEATH EQUIPMENT. SEE DENTAL PLANS FOR DETAILS.
- 18 WIRE THIS TREATMENT ROOM SAME AS TYPICAL (TREATMENT #2).
- 19 WALL MOUNTED TV; PROVIDE RG6 CABLE TO TB-2. PROVIDE DATA CABLE TO RACK.
- 20 HDMI CABLE FROM WALL MOUNTED MONITOR TO CABINET AT ENTRY TO TREATMENT ROOM.

ROARK PERKINS PERRY YELVINGTON
ARCHITECTURE • INTERIOR DESIGN
718 W. SECOND STREET • LITTLE ROCK, AR 72601-2827
(501) 372-6272 WWW.RPPYARCHITECTS.COM

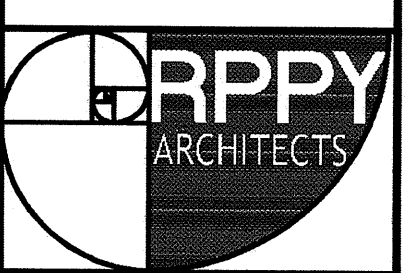
Dental Clinic & Shell Building for Dr. Clint Fulks
Highway 5 Bryant, Arkansas

STATE OF ARKANSAS REGISTERED PROFESSIONAL ENGINEER No6316 ROBERT MERRITT 10/13/16

CERTIFICATE OF AUTHORITY No227 LUCAS MERRITT & ASSOCIATES ARKANSAS ENGINEER

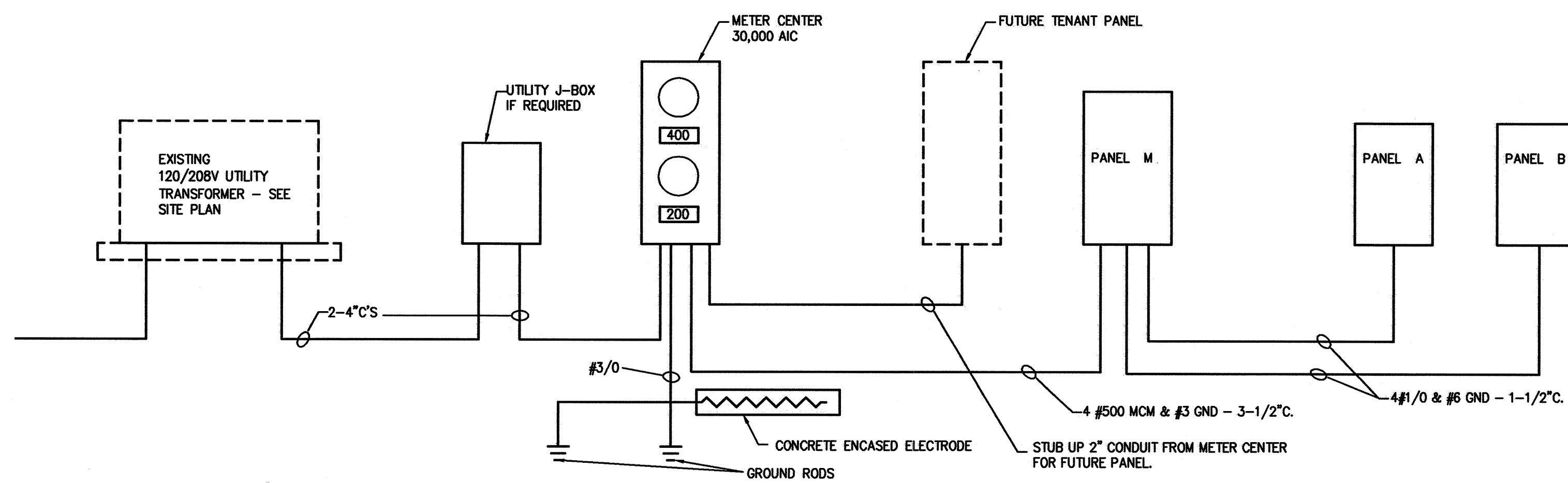
| REVISIONS | DATE |
|-----------|------|
| | |

POWER & SYSTEMS PLAN



| | |
|----------|---------|
| 10-13-16 | 1549 |
| DATE | JOB NO. |
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| SHEET | OF |

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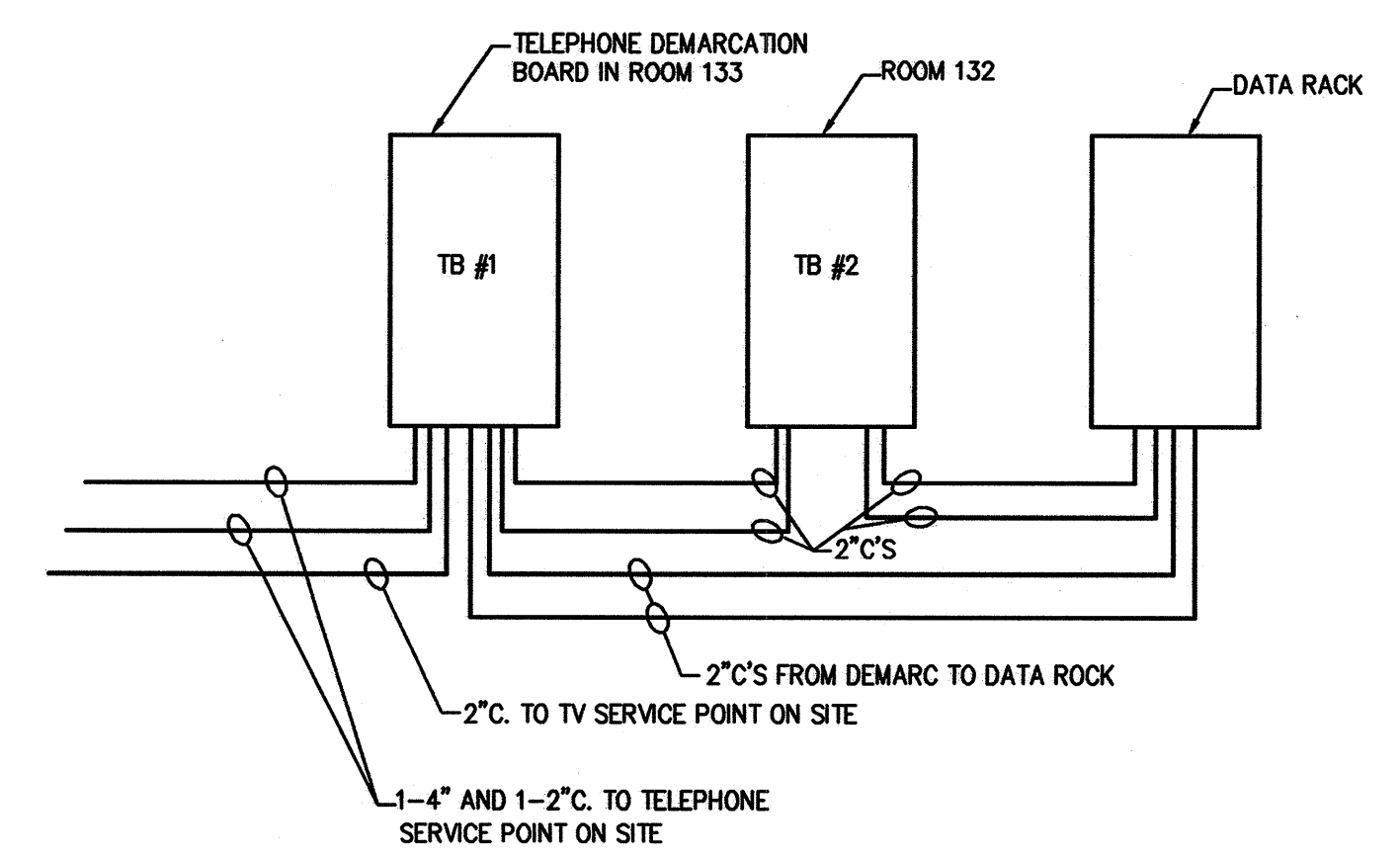


METER CENTER
120/208V, 3PH, 4W

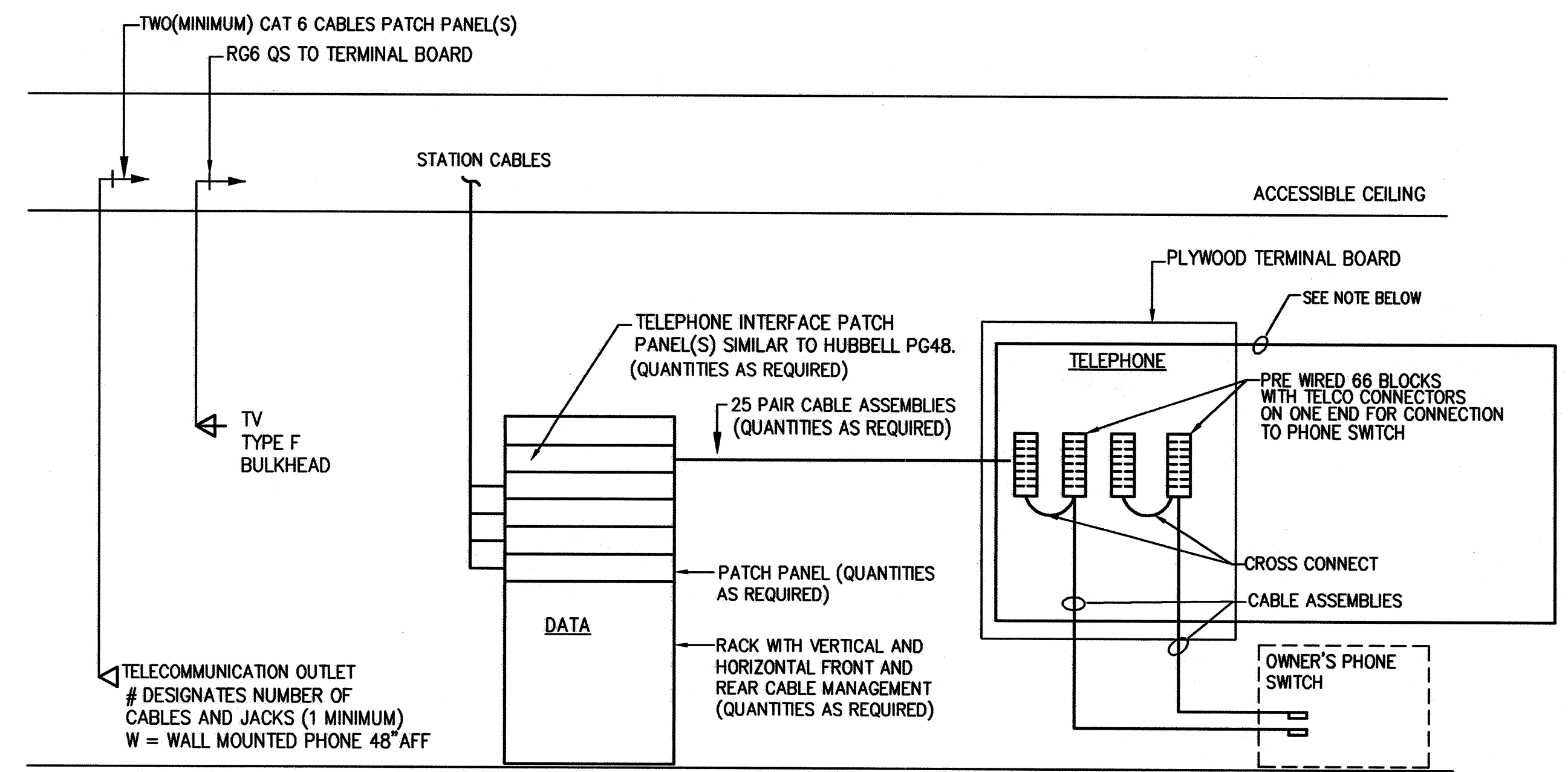
| PANEL M 22,000 AIC | | | | | |
|----------------------------------|-----------|-----------|--------------|-------------|----------|
| 120/208 VOLT, 3 PH, 4W, 400A MLO | | | | | |
| CIRC. NO. | TRIP AMPS | NO. POLES | LOAD SERVED | LOAD SERVED | |
| 1 | 30 | 2 | WATER HEATER | PANEL A | 2 150 3 |
| 3 | - | - | - | - | 4 - - - |
| 5 | - | - | SPACE | - | 6 - - - |
| 7 | 70 | 3 | RTU-SOUTH | PANEL B | 8 150 3 |
| 9 | - | - | - | - | 10 - - - |
| 11 | - | - | - | - | 12 - - - |
| 13 | 50 | 3 | RTU-NORTH | RTU-CORE | 14 40 3 |
| 15 | - | - | - | - | 16 - - - |
| 17 | - | - | - | - | 18 - - - |
| 19 | 40 | 3 | RTU-EAST | - | 20 - - - |
| 21 | - | - | - | - | 22 - - - |
| 23 | - | - | - | - | 24 - - - |
| 25 | 30 | 3 | MSA | - | 26 - - - |
| 27 | - | - | - | - | 28 - - - |
| 29 | - | - | - | - | 30 - - - |
| 31 | - | - | - | - | 32 - - - |
| 33 | - | - | - | - | 34 - - - |
| 35 | - | - | - | - | 36 - - - |
| 37 | - | - | - | - | 38 - - - |
| 39 | - | - | - | - | 40 - - - |
| 41 | - | - | - | - | 42 - - - |

| PANEL A 22,000 AIC | | | | | |
|-----------------------------|-----------|-----------|--|--|----------|
| 120/208V, 3PH, 4W, 225A MLO | | | | | |
| CIRC. NO. | TRIP AMPS | NO. POLES | | | |
| 1 | 20 | 1 | | | 2 30 2 |
| 3 | - | - | | | 4 - - - |
| 5 | - | - | | | 6 20 1 |
| 7 | - | - | | | 8 - - - |
| 9 | - | - | | | 10 - - - |
| 11 | - | - | | | 12 - - - |
| 13 | - | - | | | 14 - - - |
| 15 | - | - | | | 16 - - - |
| 17 | - | - | | | 18 - - - |
| 19 | - | - | | | 20 - - - |
| 21 | - | - | | | 22 - - - |
| 23 | - | - | | | 24 - - - |
| 25 | - | - | | | 26 - - - |
| 27 | - | - | | | 28 - - - |
| 29 | - | - | | | 30 - - - |
| 31 | - | - | | | 32 - - - |
| 33 | - | - | | | 34 - - - |
| 35 | - | - | | | 36 - - - |
| 37 | - | - | | | 38 - - - |
| 39 | - | - | | | 40 - - - |
| 41 | - | - | | | 42 - - - |
| 43 | - | - | | | 44 - - - |
| 45 | - | - | | | 46 - - - |
| 47 | 20 | 1 | | | 48 - - - |
| 49 | - | - | | | 50 - - - |
| 51 | - | - | | | 52 - - - |
| 53 | - | - | | | 54 - - - |
| 55 | - | - | | | 56 - - - |
| 57 | - | - | | | 58 - - - |
| 59 | - | - | | | 60 - - - |

| PANEL B 22,000 AIC | | | | | |
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| 120/208V, 3PH, 4W, 225A MLO | | | | | |
| CIRC. NO. | TRIP AMPS | NO. POLES | | | |
| 1 | 20 | 1 | | | 2 20 1 |
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| 17 | - | - | | | 18 - - - |
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| 27 | - | - | | | 28 - - - |
| 29 | - | - | | | 30 - - - |
| 31 | - | - | | | 32 - - - |
| 33 | - | - | | | 34 - - - |
| 35 | 30 | 2 | | | 36 - - - |
| 37 | - | - | | | 38 - - - |
| 39 | 30 | 2 | | | 40 - - - |
| 41 | - | - | | | 42 - - - |



TELEPHONE CONDUIT RISER



TELECOMMUNICATION RISER DIAGRAM

NOT TO SCALE
PROVIDE 66 BLOCKS SHOWN IF OWNER REQUIRES THEM FOR HIS PHONE SYSTEM. VERIFY TYPE OF RACK AND PHONE SYSTEM. VERIFY ADEQUATE SPACE PRIOR TO ORDERING COMPONENTS.

M: \Jobs\RPY\ Fuiks Denta1. C:\Inic 2016-014\2016-014 E4.01 POWER RISER AND SCHEDULES PLAN.dwg Thu Oct 13 12:53:05 2016

ROARK PERKINS PERRY YELVINGTON
ARCHITECTURE • INTERIOR DESIGN
719 W. SECOND STREET • LITTLE ROCK, AR 72201-2887
(501) 524-2872

Dental Clinic & Shell Building for Dr. Clint Fulks
Highway 5 Bryant, Arkansas

STATE OF ARKANSAS REGISTERED PROFESSIONAL ENGINEER No6316 ROBERT MERRIOTT 10/13/16
LUCAS MERRIOTT & ASSOCIATES No227

| REVISIONS | DATE |
|-----------|------|
| | |
| | |

POWER RISER AND SCHEDULES

RPY ARCHITECTS

| | |
|----------|---------|
| 10-13-16 | 1549 |
| DATE | JOB NO. |
| E4.01 | 4 |
| SHEET | OF |

DRAWINGS, WRITTEN MATERIAL, AND DESIGN CONCEPTS SHALL NOT BE USED OR REPRODUCED IN WHOLE OR PART IN ANY FORM WITHOUT PRIOR CONSENT OF ROARK PERKINS PERRY YELVINGTON ARCHITECTS. DO NOT SCALE DRAWINGS. USE GIVEN DIMENSIONS ONLY. IF NOT SHOWN, VERIFY DIMENSIONS WITH THE ARCHITECT. CONTRACTOR SHALL CHECK AND VERIFY ALL DIMENSIONS AND CONDITIONS AT JOB SITE.

GENERAL NOTES

- ALL DIMENSIONS AND FIELD CONDITIONS WILL BE VERIFIED BY THE GENERAL CONTRACTOR. THE ACCURACY OF THE FIELD MEASUREMENTS IS THE RESPONSIBILITY OF THE GENERAL CONTRACTOR.
- THE GENERAL CONTRACTOR AND ALL SUBCONTRACTORS WILL COMPLY WITH ALL FEDERAL, STATE, AND LOCAL LAWS AND ORDINANCES PERTAINING TO THE CONSTRUCTION OF THIS DENTAL OFFICE.
- MILLWORK SHALL BE DESIGNED BY THE MILLWORK SUPPLIER AND/OR DENTAL CABINETRY SUPPLIER EXCEPT AS NOTED.
- BENCO SUGGESTS COMPLIANCE WITH CDC/OSHA RECOMMENDATIONS AGAINST INSTALLING CARPETING IN TREATMENT ROOMS.
- ALL HAZARDS, TEMPORARY OR OTHERWISE SHALL BE PROTECTED TO PRESERVE PUBLIC SAFETY.
- BENCO WILL SUPPLY ALL DETAILED TEMPLATES AND/OR DETAIL MANUFACTURER'S INSTRUCTIONS. SUCH TEMPLATES AND INSTRUCTIONS WILL DEFINE THE LOCATIONS, CONNECTIONS, AND SERVICES REQUIRED BY THE DENTAL EQUIPMENT. ERRORS RESULTING FROM THE FAILURE OF THE GENERAL CONTRACTOR TO FOLLOW THE INSTRUCTIONS AND/OR TEMPLATES WILL BE THE RESPONSIBILITY OF THE GENERAL CONTRACTOR.
- DIMENSIONS FOR ALL DENTAL EQUIPMENT ARE CRITICAL AND MUST COMPLY WITH THE MANUFACTURER'S SPECIFICATIONS, AS SUPPLIED BY BENCO. BENCO WILL NOT ASSUME RESPONSIBILITY FOR UNAUTHORIZED VARIATIONS TO THE PLANS AND/OR THE MANUFACTURER'S SPECIFICATIONS.
- WHERE NEW MATERIALS ARE TO BE APPLIED IN EXISTING AREAS, THE GENERAL CONTRACTOR WILL REMOVE EXISTING MATERIALS, AS REQUIRED, AND PROPERLY PREPARE AREA TO RECEIVE THE NEW WORK.
- THE GENERAL CONTRACTOR WILL INSPECT ALL AREAS OF CONSTRUCTION AFTER COMPLETION OF THE WORK AND PROVIDE "REPAIR" AND "TOUCH-UP" PAINTING, IN ORDER TO RETURN AREA TO ORIGINAL CONDITION.
- ALL WORK FOR ALL TRADES WILL BE GUARANTEED FOR A PERIOD OF ONE YEAR MINIMUM FROM THE DATE OF ITS ACCEPTANCE.
- ALL MATERIALS INCORPORATED INTO THE WORK WILL BE NEW, UNLESS OTHERWISE NOTED. INSPECTIONS BY A BENCO REPRESENTATIVE ARE AN INTEGRAL PART OF OFFICE CONSTRUCTION.
- IT IS RESPONSIBILITY OF THE CUSTOMER OR HIS GENERAL CONTRACTOR TO ARRANGE FOR ALL MEETINGS, INCLUDING THE INITIAL REVIEW OF THE PLANS, SPECIFICATIONS, AND TEMPLATES AND ALL SUBSEQUENT INSPECTIONS.

BENCO DENTAL INSPECTIONS

- INITIAL REVIEW OF THE PLANS, SPECIFICATIONS, AND FIELD CONDITIONS WITH THE GENERAL CONTRACTOR, CARPENTER, PLUMBER, AND ELECTRICIAN BEFORE RENOVATIONS BEGIN.
 - INSPECTION AFTER FRAMING AND BLOCKING ARE COMPLETE, PLUMBING AND ELECTRICAL LINES ARE INSTALLED, AND BEFORE WALLS AND/OR FLOORS ARE CLOSED.
 - FINAL INSPECTION AFTER FINISH WORK IS COMPLETE, TWO (2) DAYS PRIOR TO THE INSTALLATION OF DENTAL EQUIPMENT.
- BENCO WILL BE PROVIDED FIVE (5) DAYS ADVANCE NOTICE OF ALL MEETINGS. TO ARRANGE THE ABOVE, PLEASE CALL THE EQUIPMENT SPECIALIST LISTED UNDER THE PROJECT TEAM SECTION OF THE COVER SHEET.
 - CONTRACTOR SHALL CONSULT DOCTOR AND/OR BUILDING OWNER AND, WHERE APPLICABLE, BE RESPONSIBLE FOR THE SUPPLY AND INSTALLATION OF THE FOLLOWING:
 - UPGRADING AND INSTALLATION OF ELECTRICAL SERVICE TO DENTAL OFFICE
 - COMPLETE HVAC SYSTEM
 - HOT WATER SYSTEM
 - FIRE SAFETY DEVICES INCLUDING: ALARMS, DETECTORS, EXTINGUISHERS, ETC.
 - ILLUMINATED EXIT SIGNS
 - GENERAL AND EMERGENCY LIGHTING
 - TELEPHONE SYSTEM AND WIRING
 - SOUND SYSTEM
 - COMPUTER SYSTEM WIRING

PROJECT NAME & LOCATION

DR. CLINT FULKS BRYANT, AR

GENERAL CONDITIONS

1. SUMMARY OF WORK

DIVISION OF RESPONSIBILITIES TERMINOLOGY:

- "CONTRACTOR": WHERE REFERENCED ON THE DRAWINGS, THE TERM "CONTRACTOR" REFERS TO THE PERSON OR ENTITY RESPONSIBLE FOR PROVIDING ALL CONSTRUCTION WORK.
- CONSTRUCTION DRAWINGS:
 - CONSTRUCTION DRAWINGS SHALL NOT BE SCALED IN ORDER TO DETERMINE LOCATIONS OF ITEMS OF CONSTRUCTION. LARGER SCALE DETAILS TAKE PRECEDENCE OVER SMALLER SCALE DETAILS. DIMENSIONED DETAILS TAKE PRECEDENCE OVER NON-DIMENSIONED DETAILS.
 - THE WORD "FURNISH" IS USED TO MEAN "SUPPLY" COMPLETE WITH ALL ESSENTIAL ACCESSORIES SO THAT THE WORK WHEN INSTALLED FUNCTIONS FOR ITS INTENDED USE, AND DELIVERY TO THE PROJECT SITE, READY FOR UNLOADING, UNPACKING, ASSEMBLY, INSTALLATION, AND SIMILAR OPERATIONS.
 - THE WORD "INSTALL" IS USED TO DESCRIBE OPERATIONS AT THE PROJECT SITE INCLUDING THE UNLOADING, UNPACKING, ASSEMBLY, ERECTION, PLACING, ANCHORING, APPLYING, WORKING TO DIMENSION, FINISHING, CURING, CONNECTING, PROTECTING, CLEANING, AND SIMILAR OPERATIONS NECESSARY FOR THE WORK TO FUNCTION FOR ITS INTENDED USE.
 - THE WORD "PROVIDE" MEANS "FURNISH AND INSTALL", AS DEFINED ABOVE, COMPLETE IN-PLACE AND READY FOR INTENDED USE. THE WORD "PROVIDE" THUS REQUIRES INCLUSION OF ALL ACCESSORIES, ATTACHMENTS, SUPPORTS AND SERVICES NECESSARY TO COMPLY WITH THIS DEFINITION, WHETHER OR NOT SPECIFICALLY IDENTIFIED OR DESCRIBED IN THE CONSTRUCTION DOCUMENTS.

ENVIRONMENTAL ASSESSMENT:

- REMOVAL OF HAZARDOUS MATERIALS, IF IDENTIFIED BY ANY ENVIRONMENTAL ASSESSMENT PERFORMED BY AN ENVIRONMENTAL ENGINEER CONTRACTED BY THE OWNER, SHALL BE COMPLETED BY WAY OF A HAZARDOUS MATERIALS REMOVAL CONTRACT EXECUTED BY THE OWNER INDEPENDENT FROM AND PRIOR TO THE DATE OF COMMENCEMENT.

2. PERMIT SUBMISSION, REVIEWS, APPROVALS & FEES

PERMIT SUBMISSION BY CONTRACTOR:

- THE CONTRACTOR SHALL SUBMIT THE APPLICATION FOR THE BUILDING PERMIT SUBMISSION, AND SHALL INCLUDE ALL REQUIRED DESIGN AND ENGINEERING DRAWINGS AND OTHER REQUIRED DOCUMENTS.
- THE CONTRACTOR SHALL COORDINATE WITH THE ARCHITECT TO PROVIDE FOLLOW-UP COORDINATION WITH THE LOCAL JURISDICTION, AS REQUIRED, WITH RESPECT TO BUILDING-RELATED ISSUES THAT IMPACT THE APPROVAL AND RELEASE OF THE BUILDING PERMIT.
- THE COST OF ARCHITECT/ENGINEER SIGNED/SEALED CONSTRUCTION DRAWINGS AND OTHER REQUIRED DOCUMENTS, AND TRANSMITTAL TO THE CONTRACTOR WILL BE THE OWNER'S RESPONSIBILITY.
- TIME AND MATERIAL COSTS FOR THE CONTRACTOR'S DELIVERY TO AND PICKUP FROM THE LOCAL JURISDICTION, AS APPLICABLE, WILL BE THE CONTRACTOR'S RESPONSIBILITY.

BUILDING PERMIT FEES:

- ALL BUILDING PERMIT FEES SHALL BE THE CONTRACTOR'S RESPONSIBILITY. SHALL BE DUE AND PAYABLE TO THE LOCAL JURISDICTION ACCORDING TO THE LOCAL JURISDICTION'S REQUIREMENTS, AND SHALL BE INCLUDED BY THE CONTRACTOR IN THE BASE BID.

CONTRACTOR LICENSE OR LOCAL SUBCONTRACTOR PERMITS:

- IF THE CONTRACTOR OR ANY SUBCONTRACTOR IS REQUIRED BY THE STATE OR LOCAL JURISDICTION TO OBTAIN AN APPLICABLE CONTRACTOR LICENSE, OR ANY OTHER LOCAL SUBCONTRACTOR PERMITS, SO AS TO PERMIT LEGAL WORK TO BE PROVIDED FOR THIS PROJECT, THEN THE CONTRACTOR IS RESPONSIBLE FOR ALL COSTS INCURRED TO SATISFY THESE JURISDICTIONAL REQUIREMENTS.
- THE COST OF ANY AND ALL CONTRACTOR LICENSE(S), SUBCONTRACTOR TRADE PERMITS, SERVICES AND INSPECTIONS SHALL BE THE CONTRACTOR'S RESPONSIBILITY AND SHALL BE INCLUDED IN THE BASE BID.
- THE PRINTING COST FOR DRAWINGS AND OTHER CONSTRUCTION DOCUMENTS REQUIRED FOR ANY CONTRACTOR LICENSE(S) OR SUBCONTRACTOR TRADE PERMITS SHALL BE THE CONTRACTOR'S RESPONSIBILITY, AND SHALL BE INCLUDED IN THE BASE BID.

FINAL CERTIFICATE OF OCCUPANCY:

- THE CONTRACTOR IS RESPONSIBLE FOR PROVIDING THE LOCAL JURISDICTION FINAL CERTIFICATE OF OCCUPANCY, OR ITS EQUIVALENT PERMIT, SO TO ALLOW THE OWNER TO COMMENCE FULL OPERATIONS, ON OR BEFORE THE DATE OF FINAL COMPLETION.

3. SITE UTILITIES

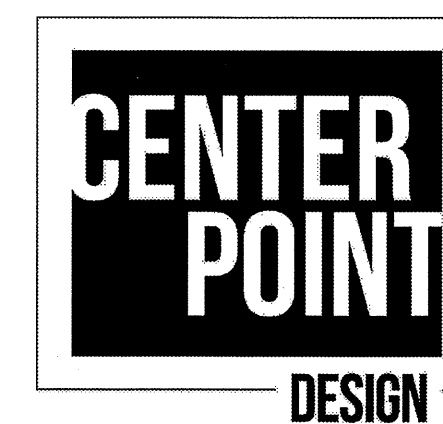
- APPLICATIONS FOR SITE UTILITY SERVICE TO THE TENANT SPACE SHALL BE COORDINATED BY THE CONTRACTOR WITH THE OWNER. LOCAL SITE UTILITY PROVIDERS' POINTS OF CONTACT MAY BE INCLUDED IN THE DRAWINGS FOR REFERENCE PURPOSES.
- THE CONTRACTOR SHALL COORDINATE THE ISSUANCE OF ALL LETTERS OF REQUEST FOR SITE UTILITY SERVICES WITH THE OWNER WITHOUT DELAY FOLLOWING THE AWARD OF THE CONTRACT FOR GENERAL CONSTRUCTION, SO AS TO CONFIRM SITE UTILITY SERVICES AND SCHEDULE CONNECTIONS AT THE EARLIEST POSSIBLE CALENDAR DATE.
- ALL COORDINATION OF PROVISIONS FOR THE SITE UTILITY SERVICES BY THE CONTRACTOR SHALL BE INCLUDED IN THE BASE BID. FEES DUE AND PAYABLE TO THE LOCAL UTILITY SO AS TO FACILITATE PROVISIONS FOR SITE UTILITY SERVICES WILL BE EITHER THE OWNERS RESPONSIBILITY, OR THE OWNER MAY COORDINATE WITH THE CONTRACTOR FOR PAYMENT BY THE CONTRACTOR, WITH REIMBURSEMENT BY THE OWNER TO THE CONTRACTOR AT DIRECT COST.

PROJECT TEAM



295 Centerpoint Blvd. 1-800-go-benco
Pittston, PA 18640 www.benco.com

EQUIPMENT SPECIALIST : PHILLIP SALERNO
PSALERNO@BENCO.COM
918-231-9081



PROJECT DESIGNER : PAUL STARITZ

DRAWING LIST

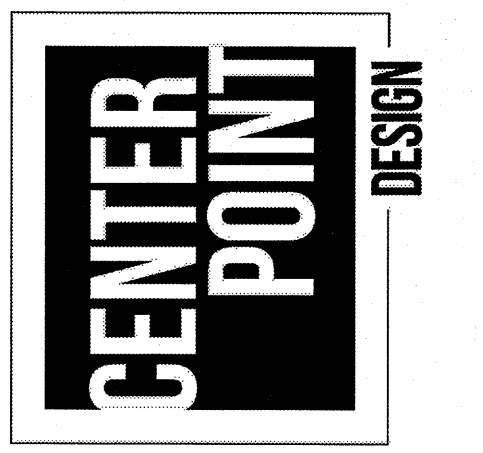
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|-------|---------------------------|--------------|----------|
| Q0.1 | COVER SHEET | DENTAL SPEC. | 09/27/16 |
| Q1.1 | DENTAL EQUIPMENT PLAN | DENTAL SPEC. | 09/27/16 |
| Q2.1 | DENTAL CARPENTRY PLAN | DENTAL SPEC. | 09/27/16 |
| Q2.2 | DENTAL CARPENTRY DETAILS | DENTAL SPEC. | 09/27/16 |
| Q3.1 | DENTAL ELECTRICAL PLAN | DENTAL SPEC. | 09/27/16 |
| Q3.2 | DENTAL ELECTRICAL DETAILS | DENTAL SPEC. | 09/27/16 |
| Q4.1 | DENTAL PLUMBING PLAN | DENTAL SPEC. | 09/27/16 |
| Q4.2 | DENTAL PLUMBING DETAILS | DENTAL SPEC. | 09/27/16 |

SYMBOLS LEGEND

| | | | |
|--|------------------|--|----------|
| | DETAIL/SHEET TAG | | SINK TAG |
| | EQUIPMENT TAG | | NOTE TAG |



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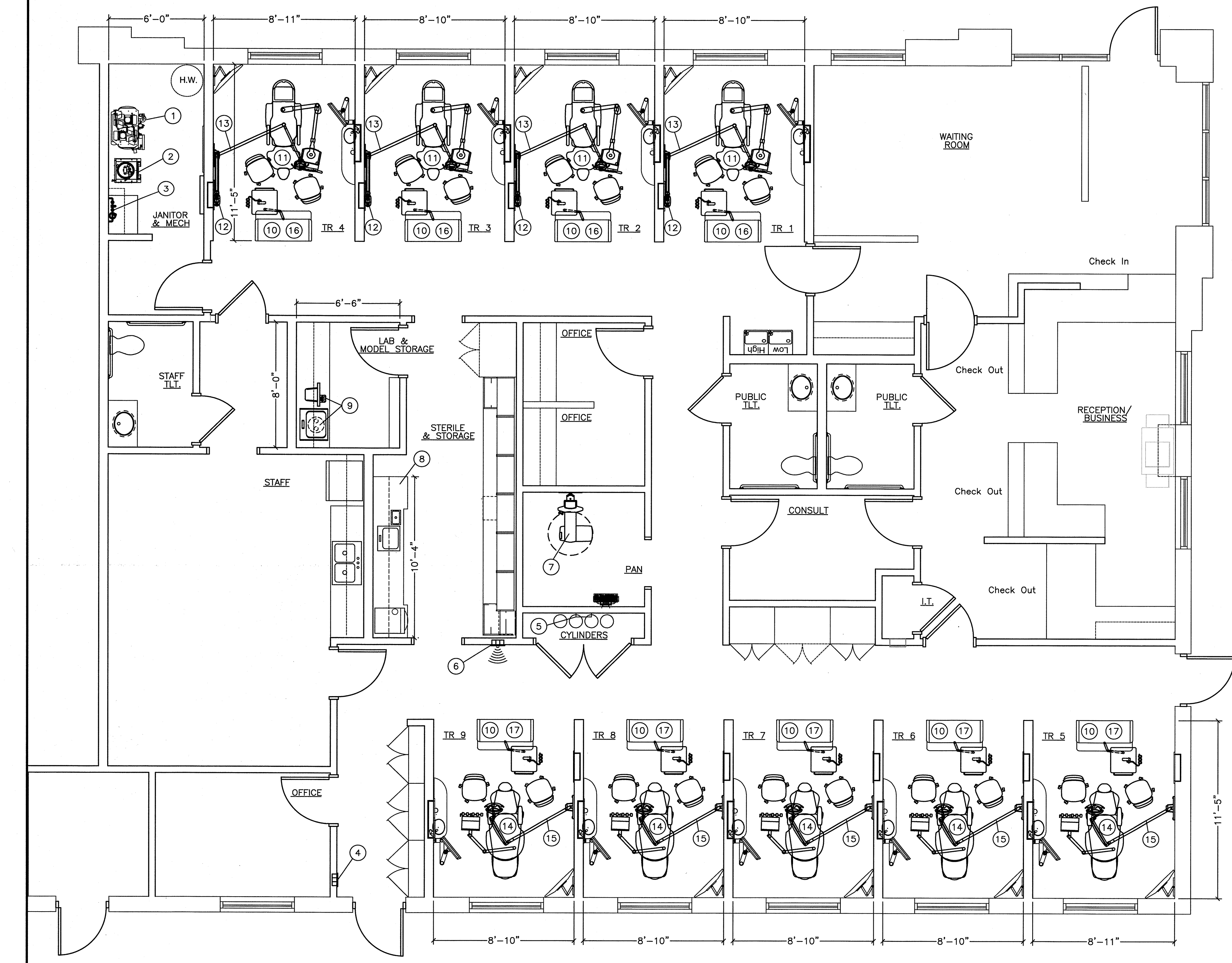
PROJECT NAME & LOCATION:

DR. CLINT FULKS
BRYANT, AR

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| ISSUED: | DATE: |
| Spec Set | 09/29/16 |

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| PROJECT #: | MS16095-PS |
| DRAWN BY: | FMS |
| CHECKED BY: | DPC |

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|----------------|-------------|
| DRAWING TITLE: | COVER SHEET |
| SHEET: | Q0.1 |



| DENTAL EQUIPMENT LEGEND | | | |
|--|---|----------|---------------------|
| ITEM | DESCRIPTION | STATUS | LOCATION |
| 1 | MIDMARK P52 AIR COMPRESSOR | NEW | JANITOR & MECH |
| 2 | MIDMARK G7 VACUUM PUMP | NEW | JANITOR & MECH |
| 3 | COLD WATER FILTER & SOLENOID | EXISTING | JANITOR & MECH |
| 4 | 3 SWITCH CONTROL PANEL | EXISTING | VERIFY LOCATION |
| 5 | ACCUTRON N2O,O2 MANIFOLD | EXISTING | CYLINDERS |
| 6 | ACCUTRON N2O,O2 ALARM | NEW | VERIFY LOCATION |
| 7 | INSTRUMENTARIUM OP200 PAN | NEW | PAN |
| 8 | ADEC STERILE CENTER | EXISTING | STERILE & STORAGE |
| 9 | MODEL TRIMMER & PLASTER TRAP | EXISTING | LAB |
| 10 | SYMMETRY FP406T REAR CABINET W/ ASSIST INST. | NEW | ALL TRS |
| 11 | ADEC CHAIR W/ CHAIR MOUNT DELIVERY | EXISTING | TRS 1, 2, 3 & 4 |
| 12 | PROGENY X-RAY | EXISTING | TRS 1, 2, 3 & 4 |
| 13 | ADEC WALL MOUNT LIGHT | EXISTING | TRS 1, 2, 3 & 4 |
| 14 | PELTON SPIRIT 3000 CHAIRW/ 1585 DELIVERY UNIT | NEW | TRS 5, 6, 7, 8 & 9 |
| 15 | PELTON HELIOS WALL MOUNT LIGHT | NEW | TRS 5, 6, 7, 8, & 9 |
| 16 | N2O,O2 FLOWMETER | EXISTING | TRS 1, 2, 3 & 4 |
| 17 | N2O,O2 FLOWMETER | NEW | TRS 5, 6, 7, 8 & 9 |
| ALL REMAINING CABINETS & COUNTERTOPS BY OTHERS | | | |

1 DENTAL EQUIPMENT PLAN
SCALE: 1/4" = 1'-0"

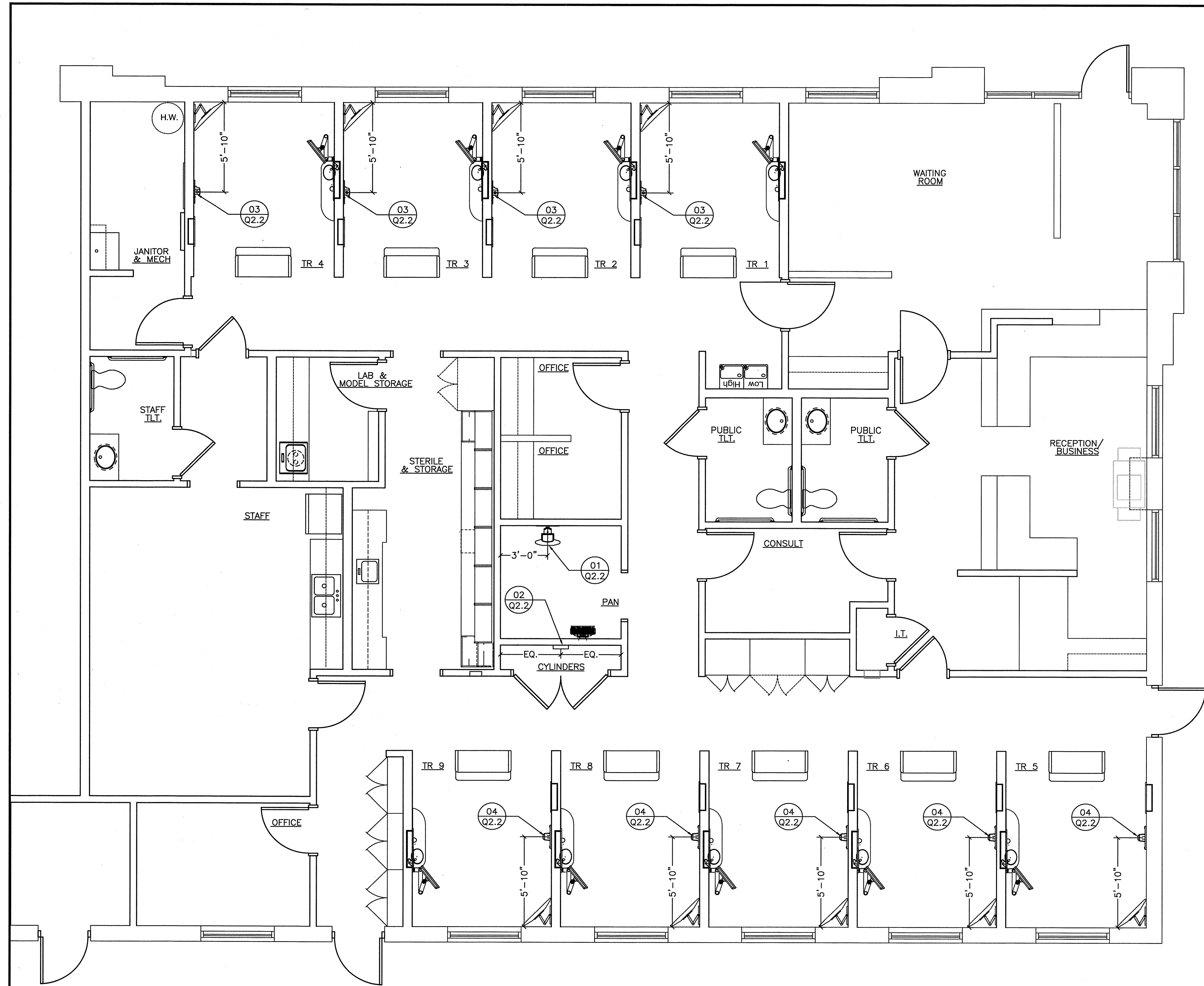
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PROJECT NAME & LOCATION:

DR. CLINT FULKS
BRYANT, AR

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| ISSUED: | DATE: |
| Spec Set | 09/29/16 |
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| PROJECT #: | |
| MS16095-PS | |
| DRAWN BY: | CHECKED BY: |
| PMS | DPC |
| DRAWING TITLE: | |
| DENTAL EQUIPMENT PLAN | |
| SHEET: | |
| Q1.1 | |

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1 DENTAL CARPENTRY PLAN
SCALE: 1/4" = 1'-0"



CARPENTRY NOTES

1. THE DRAWING IS DIMENSIONED FROM THE FACE OF A FINISH WALL TO THE FACE OF A FINISH WALL, UNLESS OTHERWISE NOTED. THE DENTAL EQUIPMENT WILL BE DIMENSIONED FROM THE FACE OF A FINISH WALL TO THE CENTERLINE OF THE EQUIPMENT, UNLESS OTHERWISE NOTED.
2. PARTITIONS SHOWN ARE 5" NOMINAL.
3. ALL BLOCKING WILL BE INSTALLED FLUSH WITH THE FACE OF THE STUDS.
4. THE GENERAL CONTRACTOR WILL BE RESPONSIBLE TO BRACE AND PROTECT ALL WORK DURING CONSTRUCTION AGAINST DAMAGE, BREAKAGES, COLLAPSE, DISTORTIONS, AND OFF-ALIGNMENT ACCORDING TO APPLICABLE CODES, STANDARDS, AND GOOD PRACTICE.
5. THE CARPENTER WILL BE RESPONSIBLE FOR BOTH THE STRUCTURAL INTEGRITY AND THE STABILITY OF ALL BLOCKING AND WALL SUPPORT.
6. THE CARPENTER WILL COMPLY WITH ALL BENCO INSPECTIONS, AS NOTED IN THE GENERAL NOTES IN THE FIRST SECTION OF THESE DOCUMENTS.
7. VERIFY LOCAL & STATE X-RAY SHIELDING REQUIREMENTS WITH ARCHITECT, CONTRACTOR OR CLIENT.



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PROJECT NAME & LOCATION:

DR. CLINT FULKS
BRYANT, AR

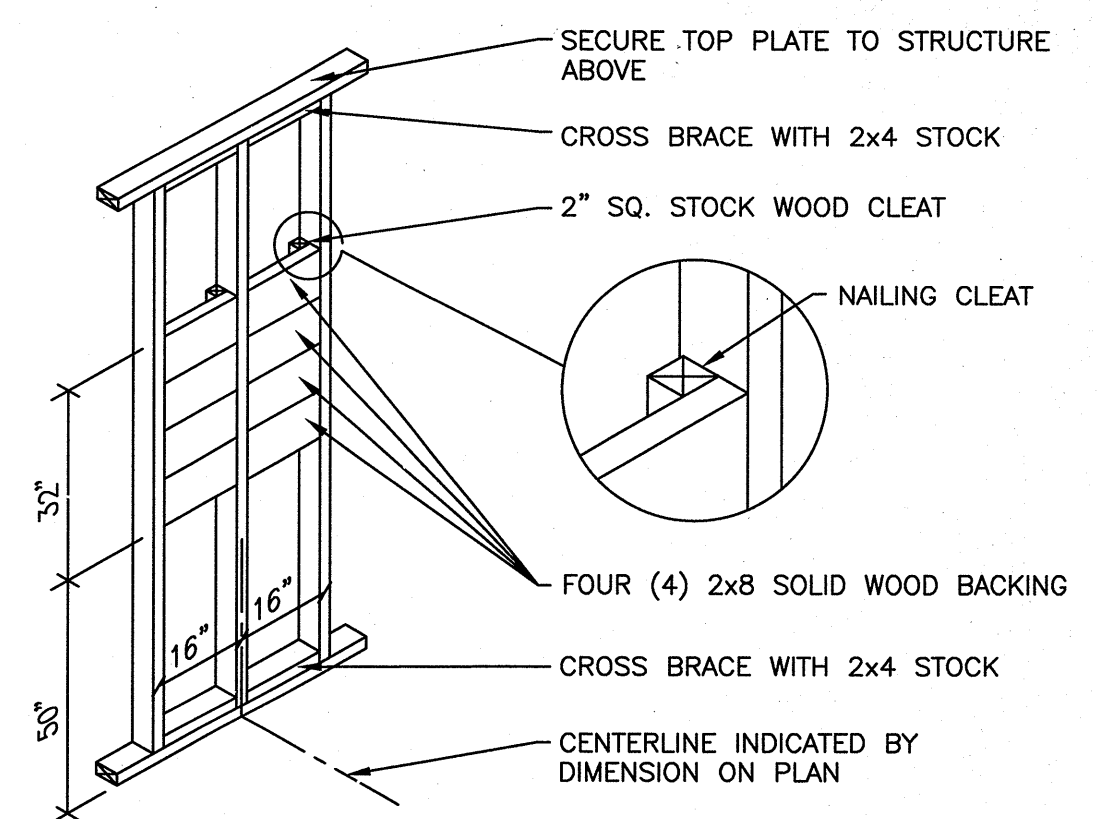
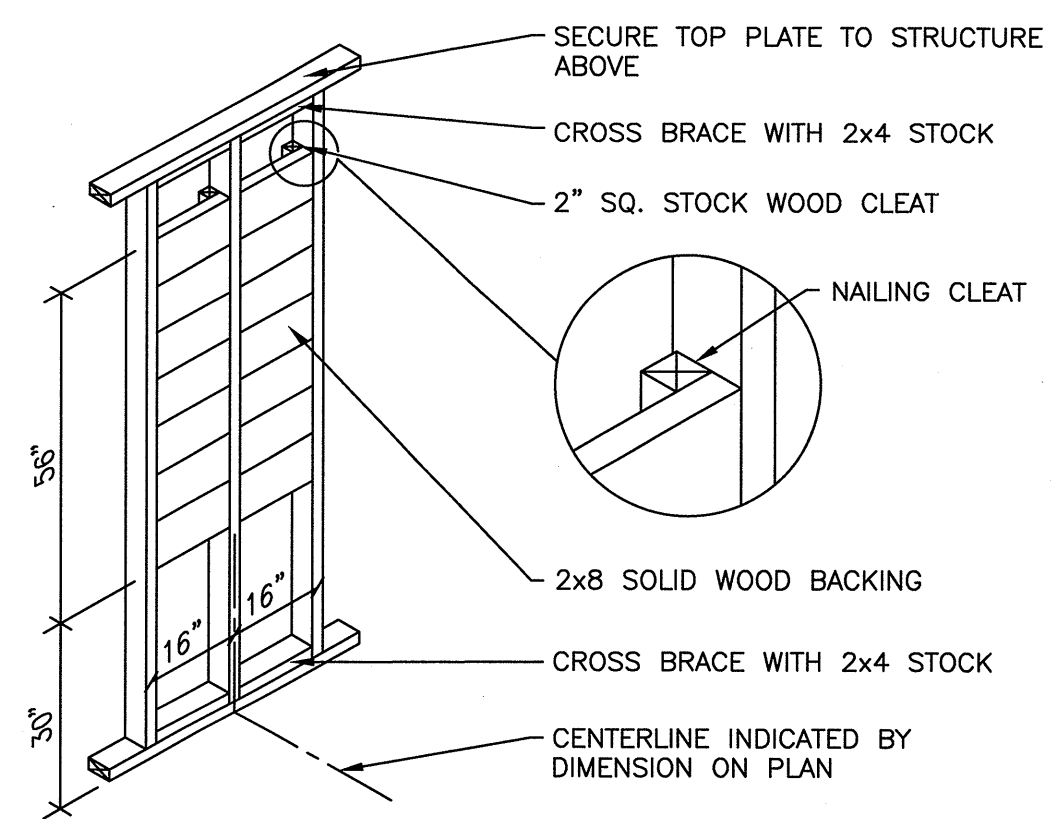
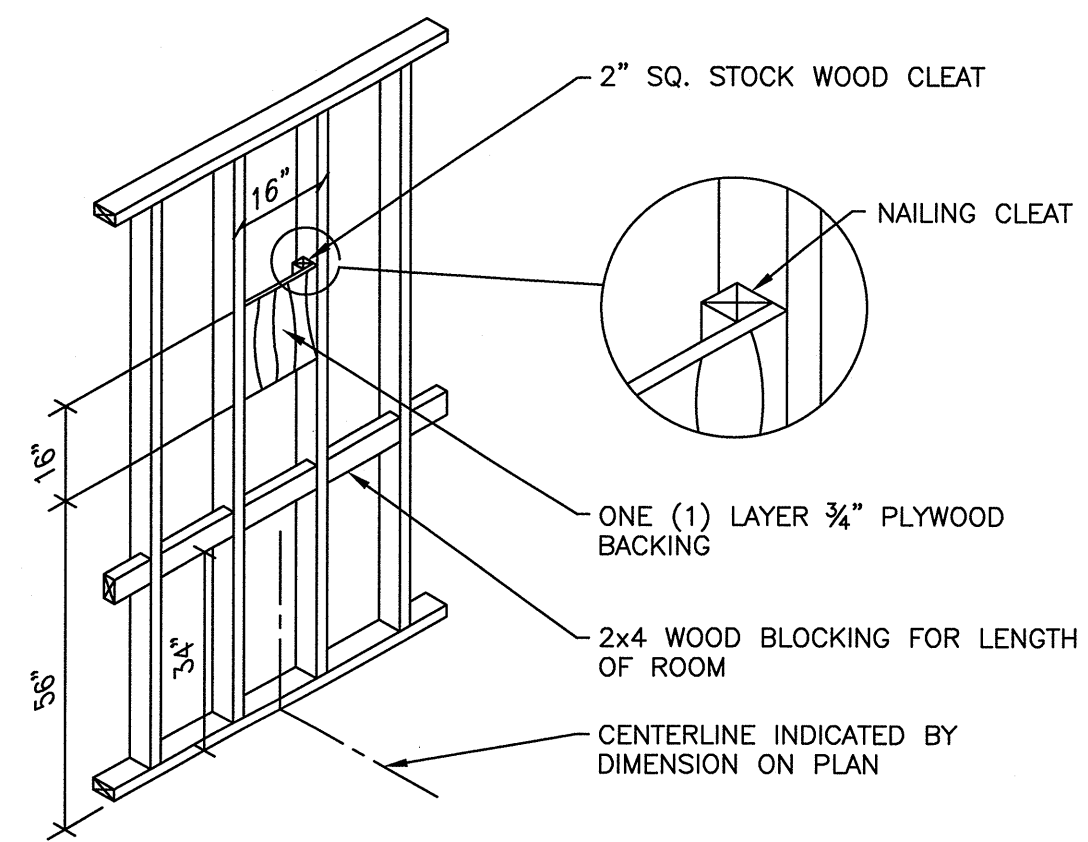
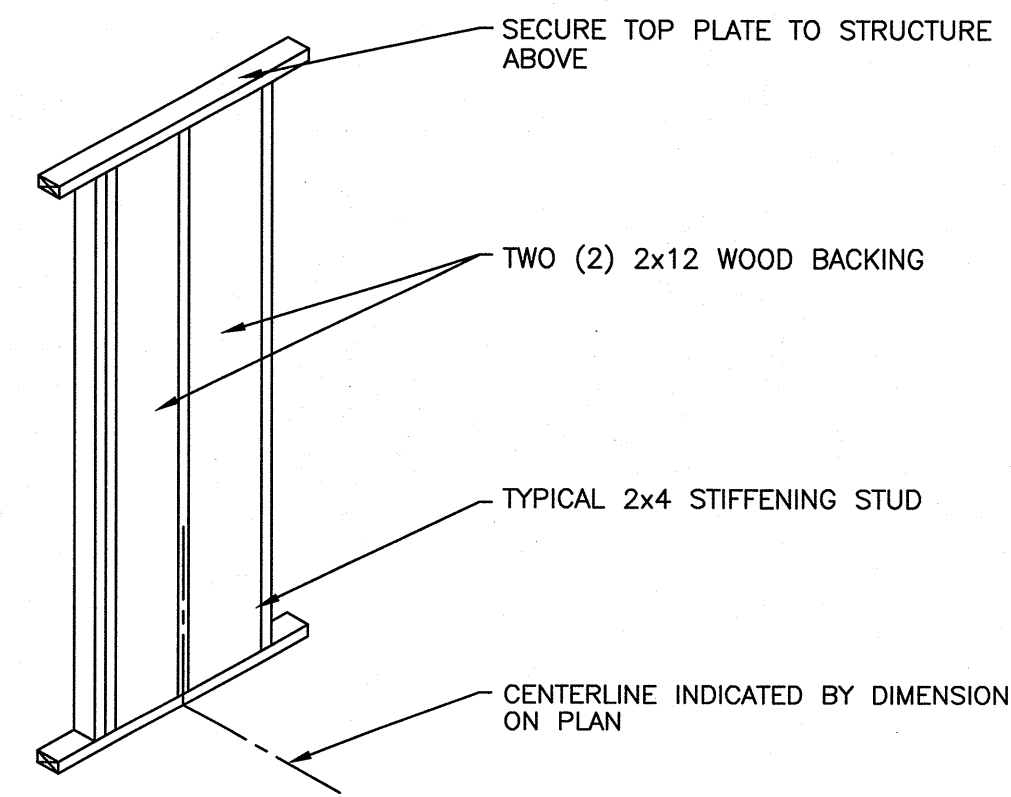
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| Spec Set | 09/29/16 |
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| PROJECT #: | |
| MS16095-PS | |
| DRAWN BY: | CHECKED BY: |
| PMS | DPC |

DRAWING TITLE:

DENTAL CARPENTRY PLAN

SHEET:

Q2.1



DETAIL - TYPICAL PAN X-RAY BACKING 01
REF.: SOURCE: N.T.S.

DETAIL - CYLINDER ROOM BACKING 02
REF.: SOURCE: N.T.S.

DETAIL - WALL MTD. LIGHT & X-RAY BACKING 03
REF.: SOURCE: N.T.S.

DETAIL - TYP. WALL MTD. LIGHT BACKING 04
REF.: SOURCE: N.T.S.

DETAIL 05
REF.: SOURCE: N.T.S.

DETAIL 06
REF.: SOURCE: N.T.S.

DETAIL 07
REF.: SOURCE: N.T.S.

DETAIL 08
REF.: SOURCE: N.T.S.

DETAIL 09
REF.: SOURCE: N.T.S.

DETAIL 10
REF.: SOURCE: N.T.S.

DETAIL 11
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DETAIL 13
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DETAIL 14
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DETAIL 15
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DETAIL 16
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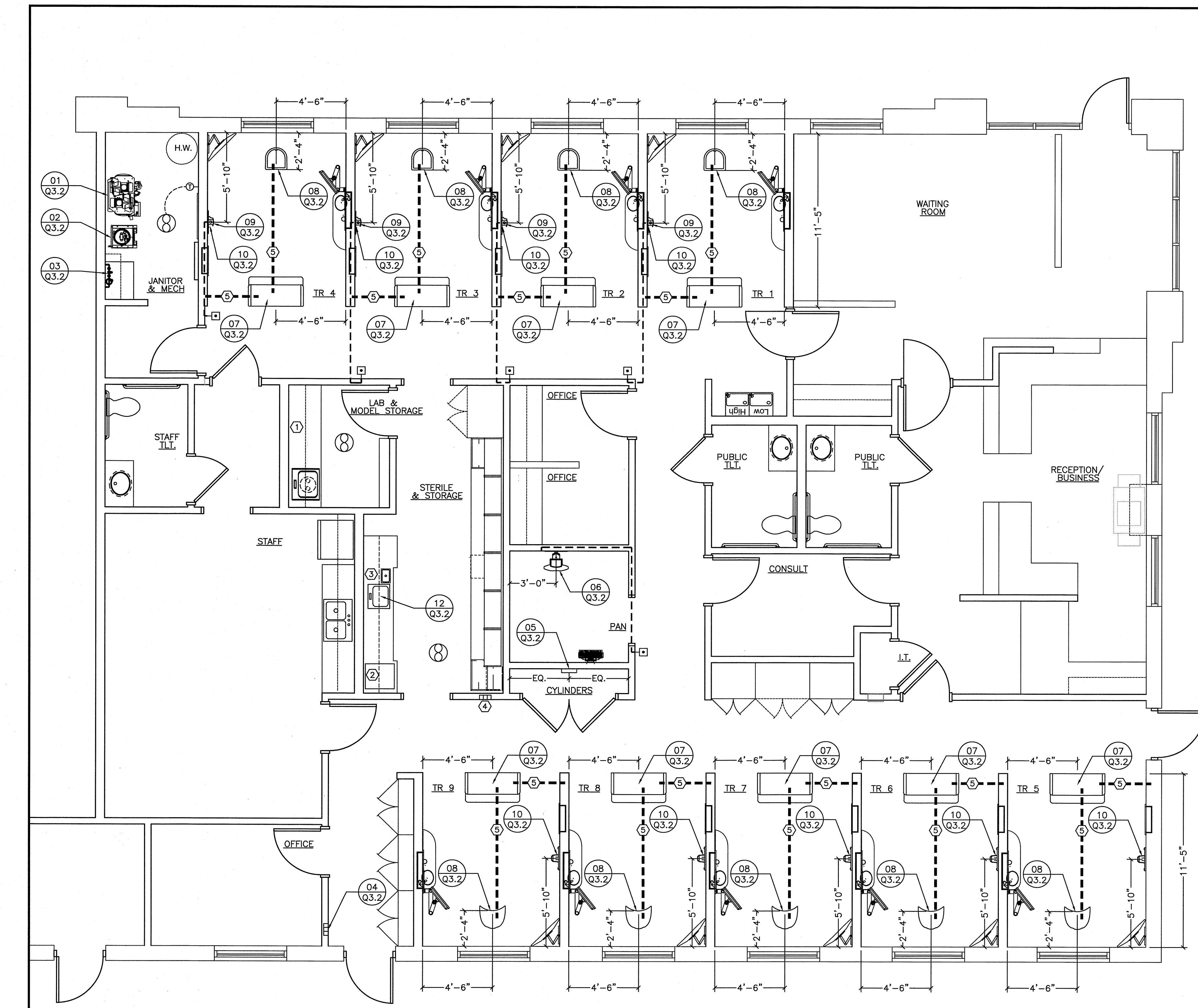
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PROJECT NAME & LOCATION:
DR. CLINT FULKS
BRYANT, AR

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| Spec Set | 09/29/16 |
| PROJECT #: | |
| MS16095-PS | |
| DRAWN BY: | CHECKED BY: |
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DRAWING TITLE:
DENTAL CARPENTRY DETAILS
SHEET:
Q2.2



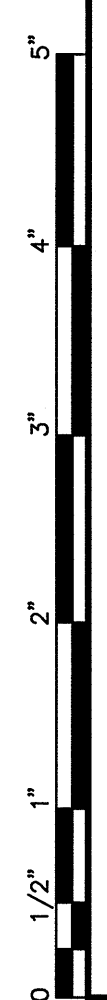


- ELECTRICAL NOTES**
- ALL EQUIPMENT WILL BE SINGLE PHASE, UNLESS OTHERWISE NOTED.
 - ALL WIRING WILL BE CONCEALED WITHIN THE WALLS AND/OR FLOOR, UNLESS OTHERWISE NOTED.
 - THE ELECTRICIAN WILL TAG ALL WIRES AT TERMINATION POINTS.
 - THE ELECTRICIAN WILL REMOVE ALL EXISTING RECEPTACLES AND SWITCHES IN THE AREA OF WORK. THE ELECTRICIAN WILL EITHER INSTALL A BLANK PLATE OVER RECEPTACLE OR SWITCH BOX OR REMOVE BOX ENTIRELY. THE ELECTRICIAN WILL TERMINATE WIRING AND CONDUIT IN A MANNER IN ACCORDANCE WITH NATIONAL ELECTRICAL CODE.
 - THE ELECTRICIAN WILL INSTALL COMPLETE AND MAKE FINAL HOOK-UP TO THE FOLLOWING DENTAL EQUIPMENT, SUPPLIED BY EITHER THE DOCTOR OR BENCO DENTAL, INCLUDING, BUT NOT LIMITED TO:
 - AIR COMPRESSOR
 - VACUUM PUMP
 - WATER CONTROL VALVE
 - CONTROL PANEL
 - THE ELECTRICIAN WILL BE ONSITE ON THE DAY(S) OF INSTALLATION TO WORK WITH THE BENCO REPRESENTATIVE ON FINAL HOOK-UP. THE ELECTRICIAN WILL SUPPLY AND INSTALL ANY AND ALL MATERIALS INDICATED IN THE ELECTRICAL DETAILS SHOWN AND MANUFACTURER'S INSTALLATION INSTRUCTION SHEETS.
 - IN THE EVENT OF ANY EQUIPMENT BEING RELOCATED TO ANOTHER LOCATION, ANY AND ALL CIRCUITS MUST BE TERMINATED BY THE ELECTRICIAN IN ACCORDANCE WITH LOCAL CODE. VERIFY RESPONSIBILITY WITH THE OWNER.
 - THE ELECTRICIAN WILL SEAL ALL PENETRATIONS THROUGH THE FLOOR WITH A FIRESTOP OR EQUIVALENT WATERPROOFING.
 - THE ELECTRICIAN WILL COMPLY WITH ALL BENCO INSPECTIONS, AS NOTED IN THE GENERAL NOTES ON THE FIRST PAGE OF THESE DOCUMENTS.
 - ALL 120 VOLT, 20 AMP OUTLETS INSTALLED WITHIN 6 FEET OF A SINK AND THOSE LOCATED OUTDOORS SHALL HAVE GFCI PROTECTION.
 - ALL 120 VOLT, 20 AMP DENTAL EQUIPMENT OUTLETS INSTALLED WITHIN 6 FEET OF A WATER SOURCE SHALL HAVE GFCI PROTECTION.

- NOTES LEGEND**
- RECEPTACLES ABOVE &/OR BELOW COUNTERTOPS (VERIFY QUANTITY & LOCATION WITH DOCTOR)
 - AUTOClave RECEPTACLES - TWO 110V, DEDICATED 20 AMP CIRCUITS (VERIFY LOCATIONS WITH BENCO REP. AT TIME OF LAYOUT)
 - ULTRASONIC RECEPTACLE - 110V, DEDICATED 20 AMP CIRCUIT (VERIFY LOCATION WITH BENCO REP. AT TIME OF LAYOUT)
 - N2O,O2 WALL ALARM (SEE DETAIL 05 ON SHEET Q3.2 FOR EXAMPLE)
 - 2" CONDUIT (SEE DETAIL 11 ON SHEET Q3.2 FOR EXAMPLE)

| ELECTRICAL LEGEND | |
|-------------------|---|
| SYMBOL | DESCRIPTION |
| ⊗ | EXHAUST FAN MOUNTED IN CEILING (VERIFY CFM REQUIREMENTS WITH ARCHITECT) |
| ⊞ | EXPOSURE BUTTON |
| ⊕ | THERMOSTATIC ON/OFF SWITCH |

1 DENTAL ELECTRICAL PLAN
SCALE: 1/4" = 1'-0"

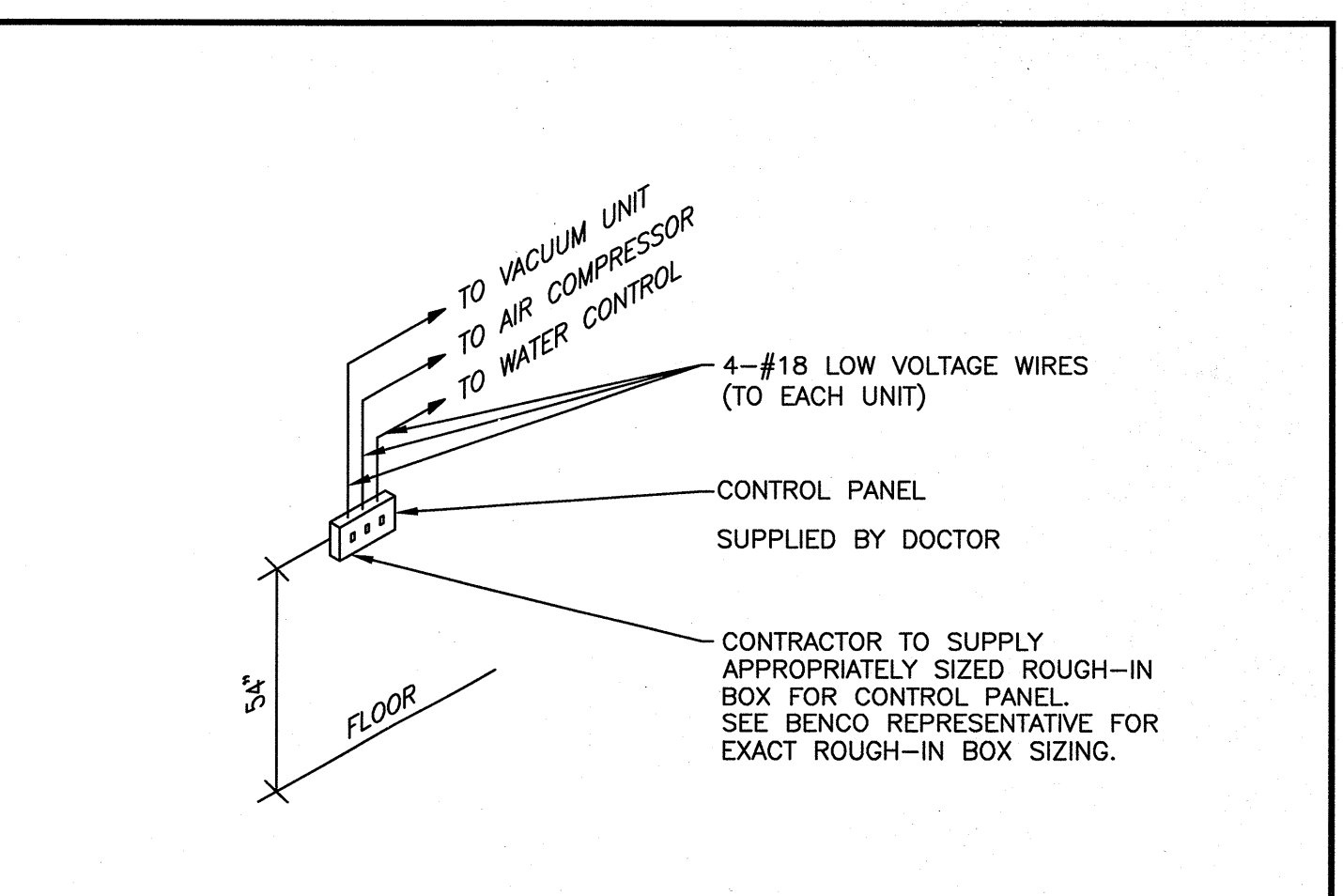
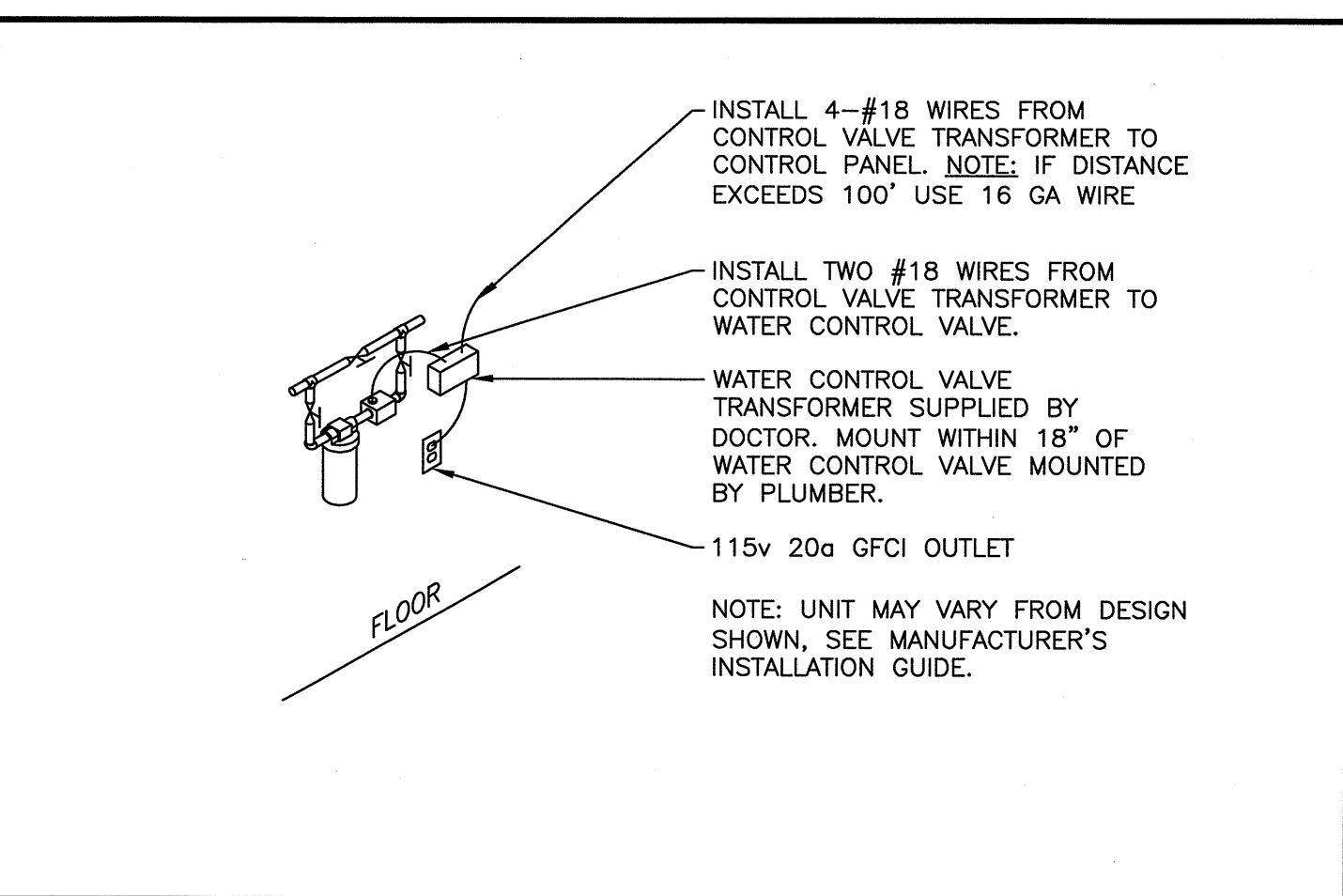
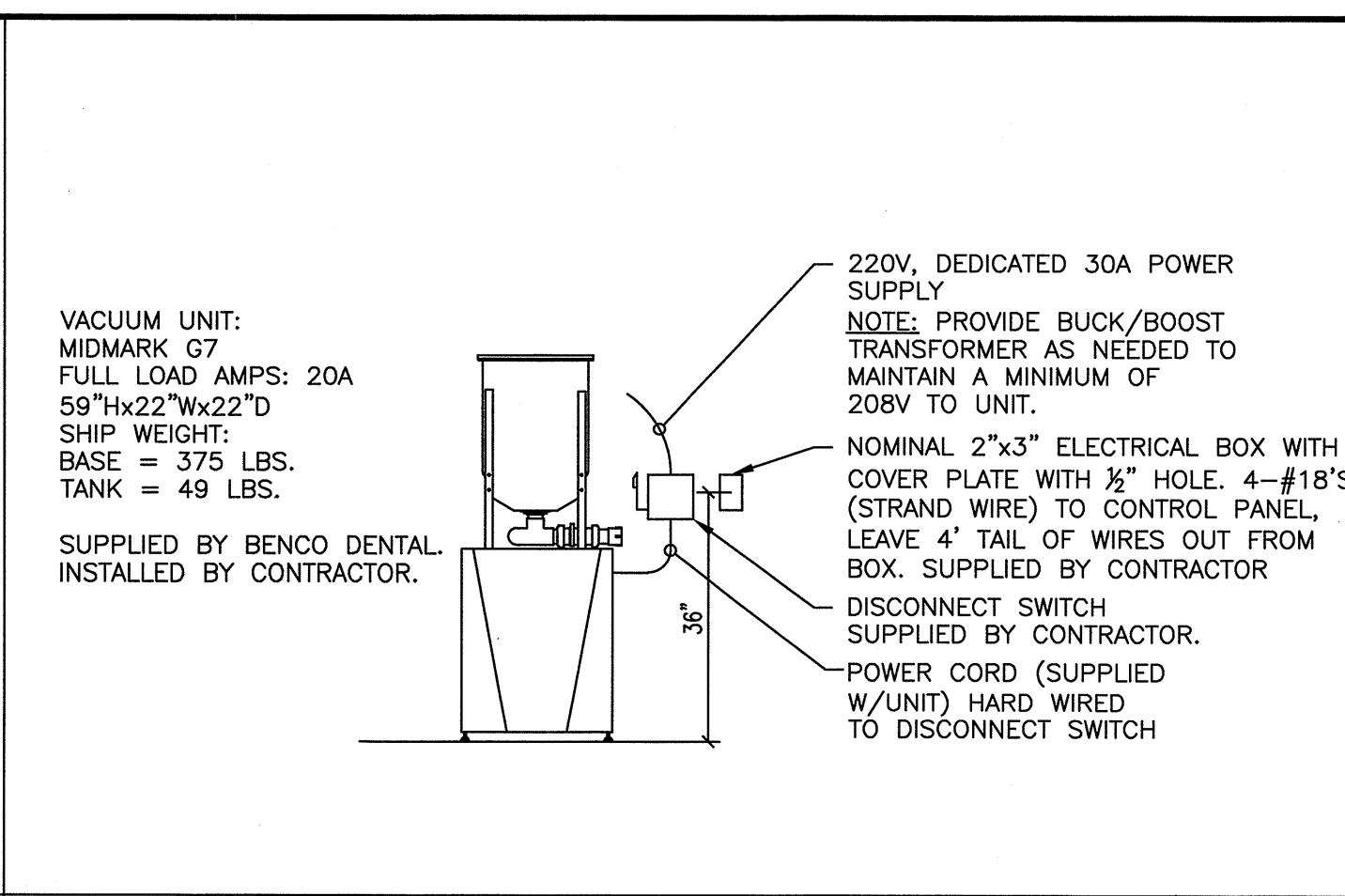
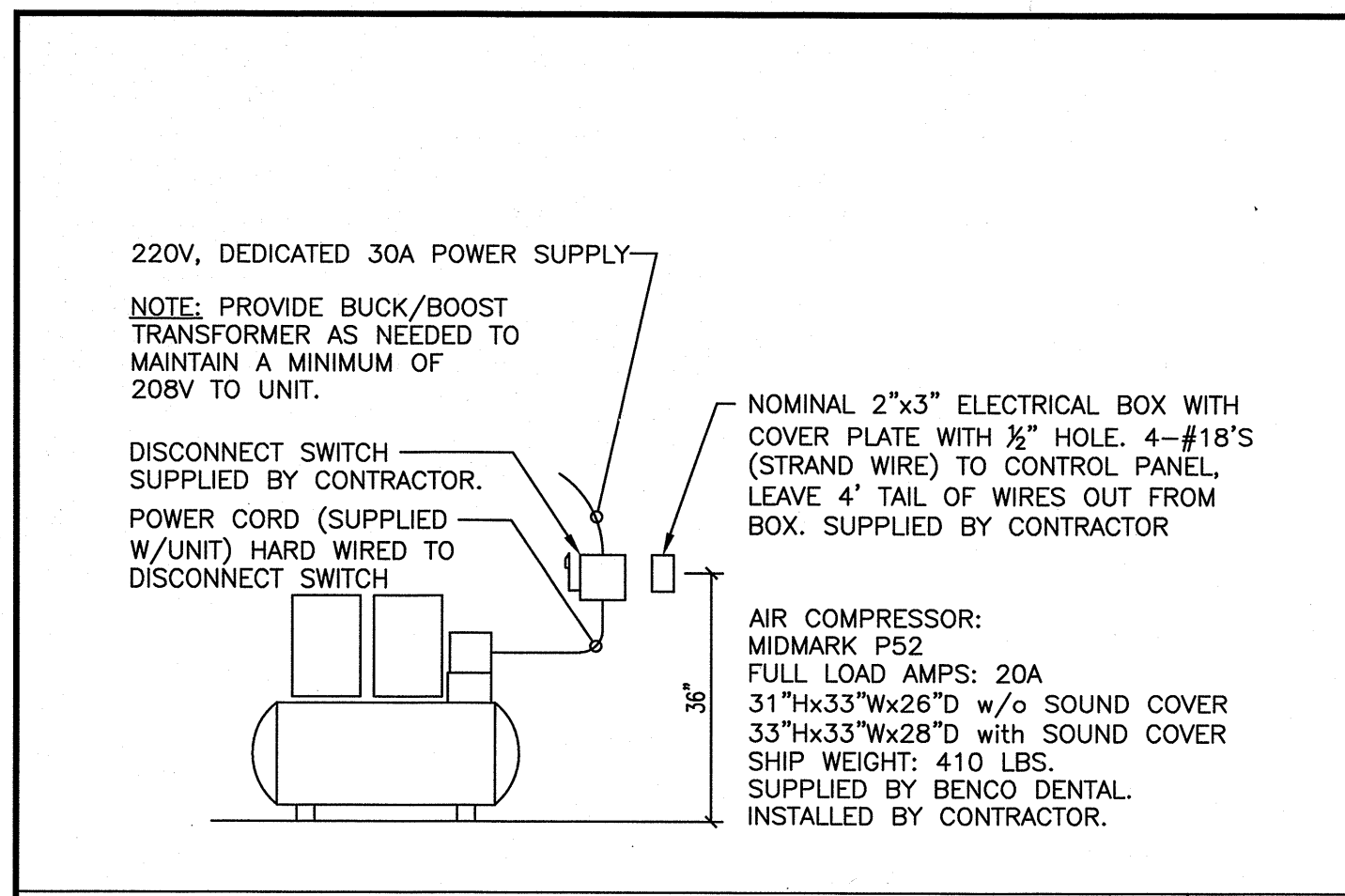


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| DENTAL ELECTRICAL PLAN | |
| SHEET: | |
| Q3.1 | |

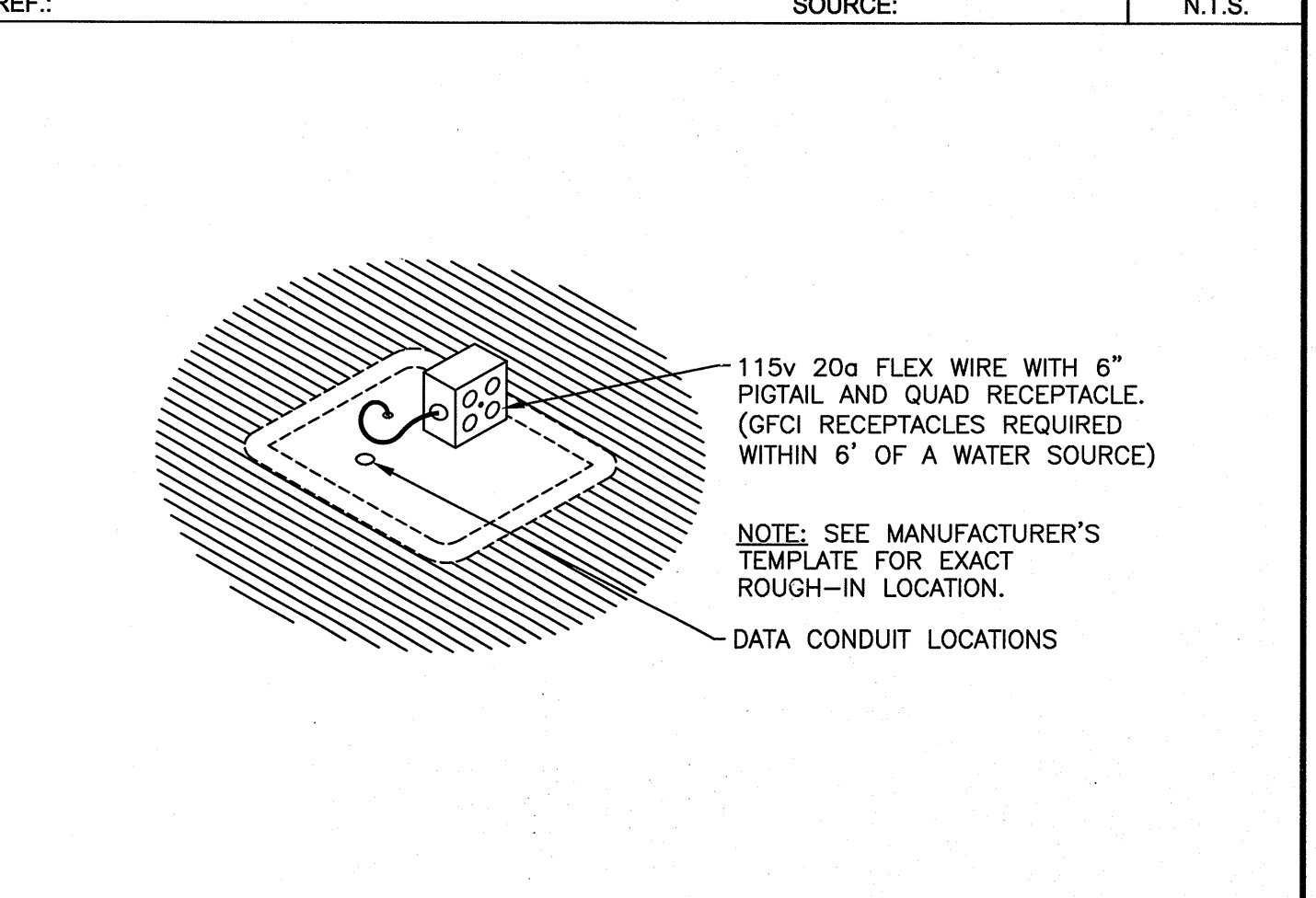
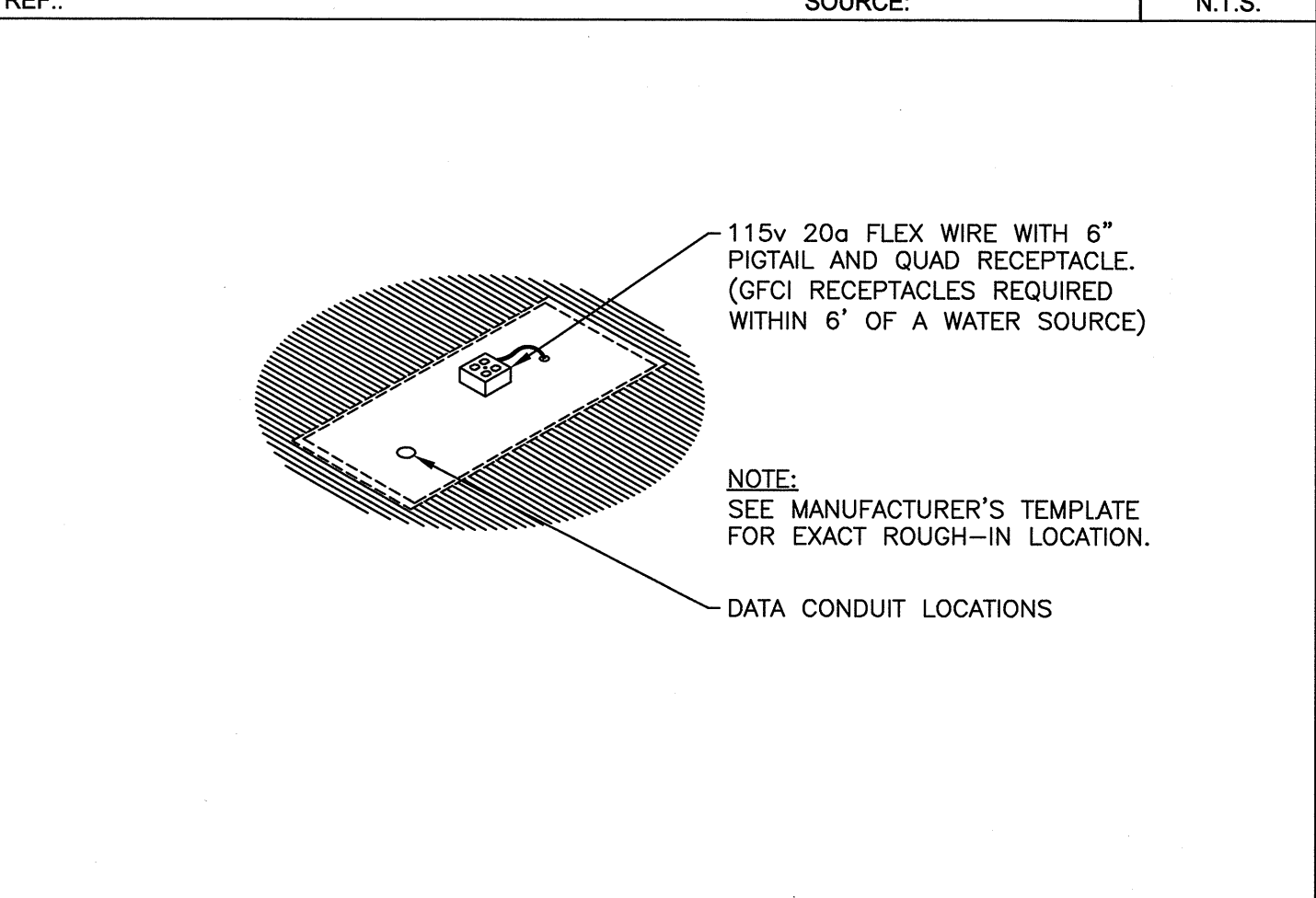
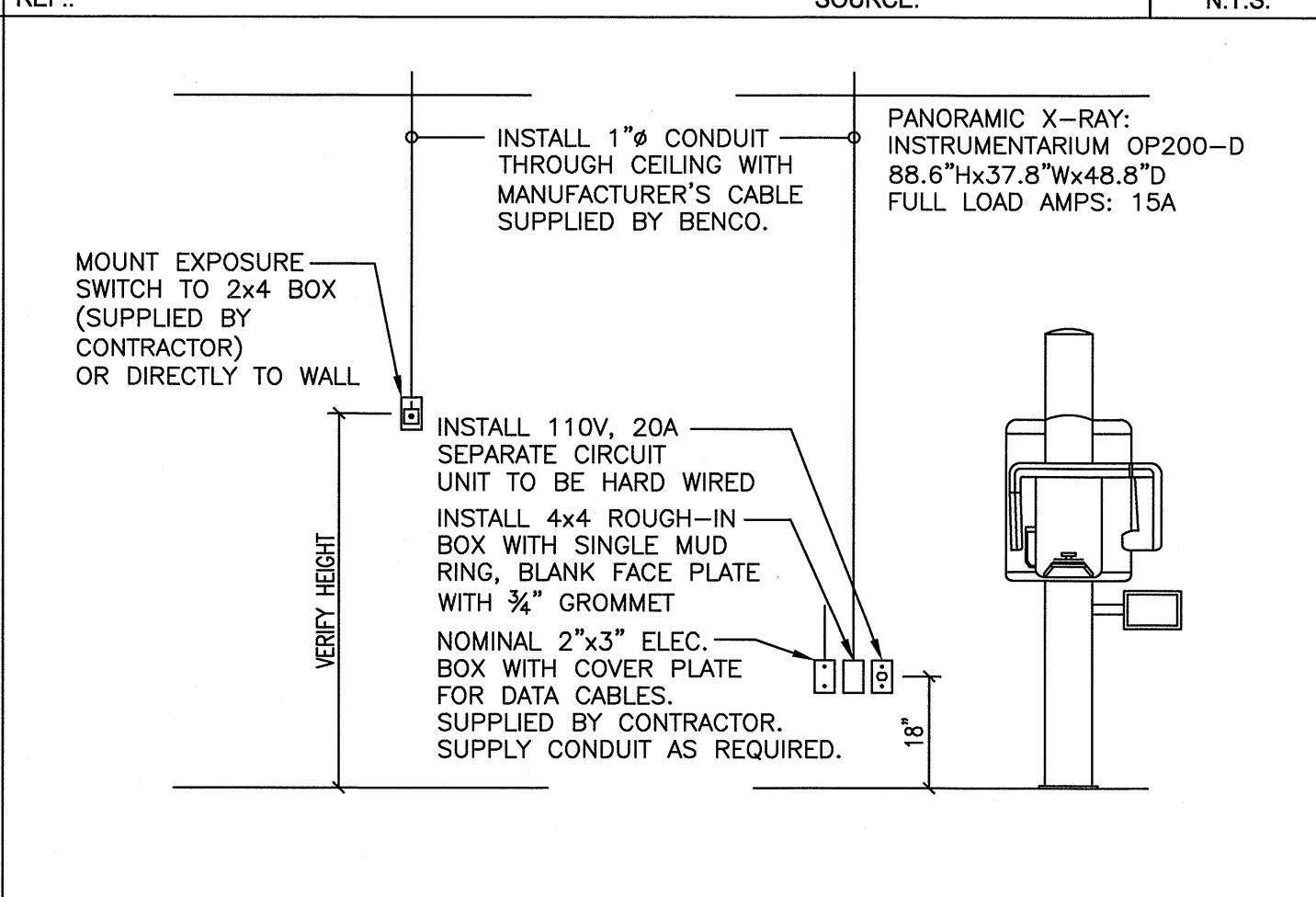
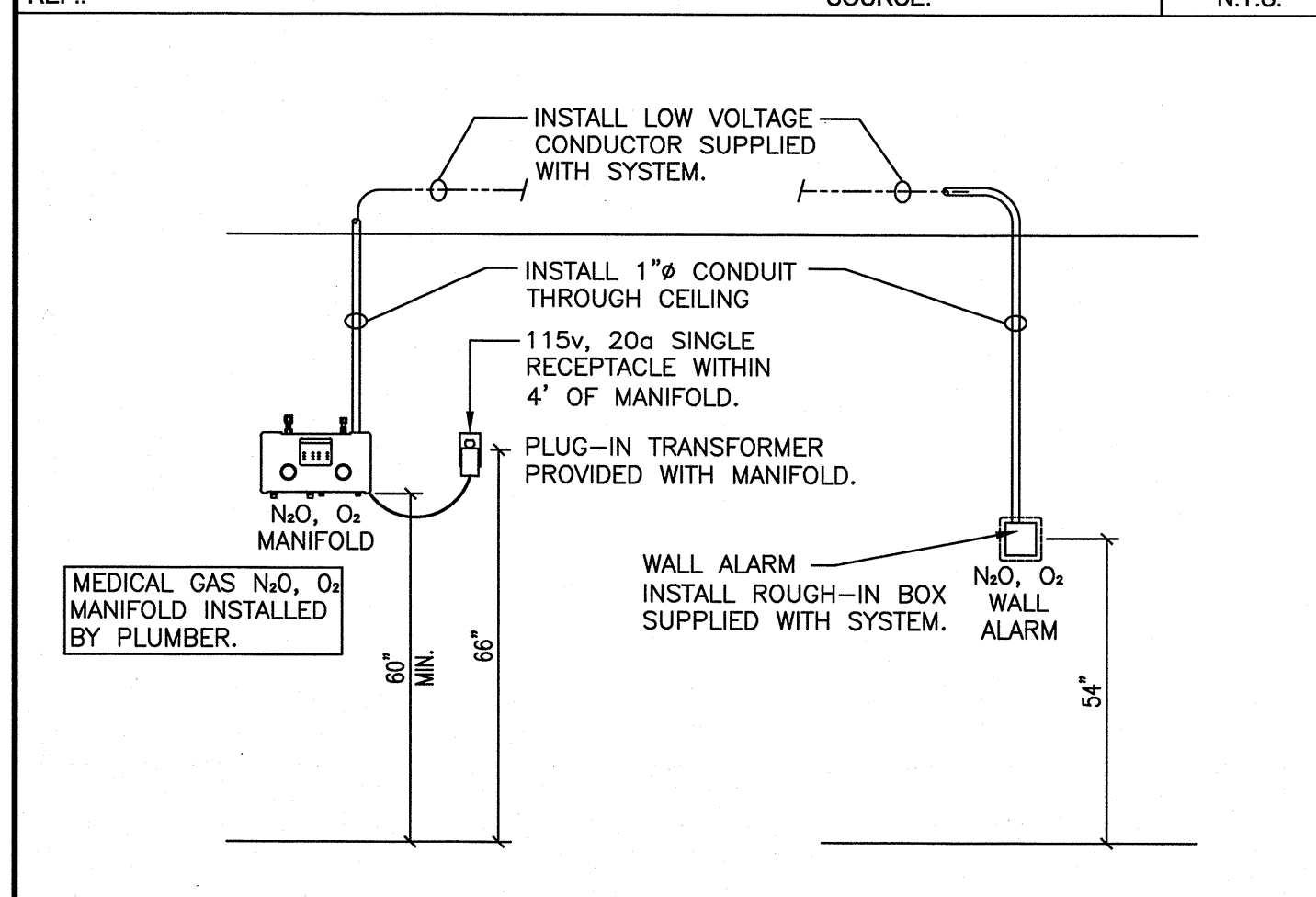


DETAIL - AIR COMPRESSOR 01

DETAIL - VACUUM PUMP 02

DETAIL - WATER CONTROL VALVE 03

DETAIL - CONTROL PANEL 04

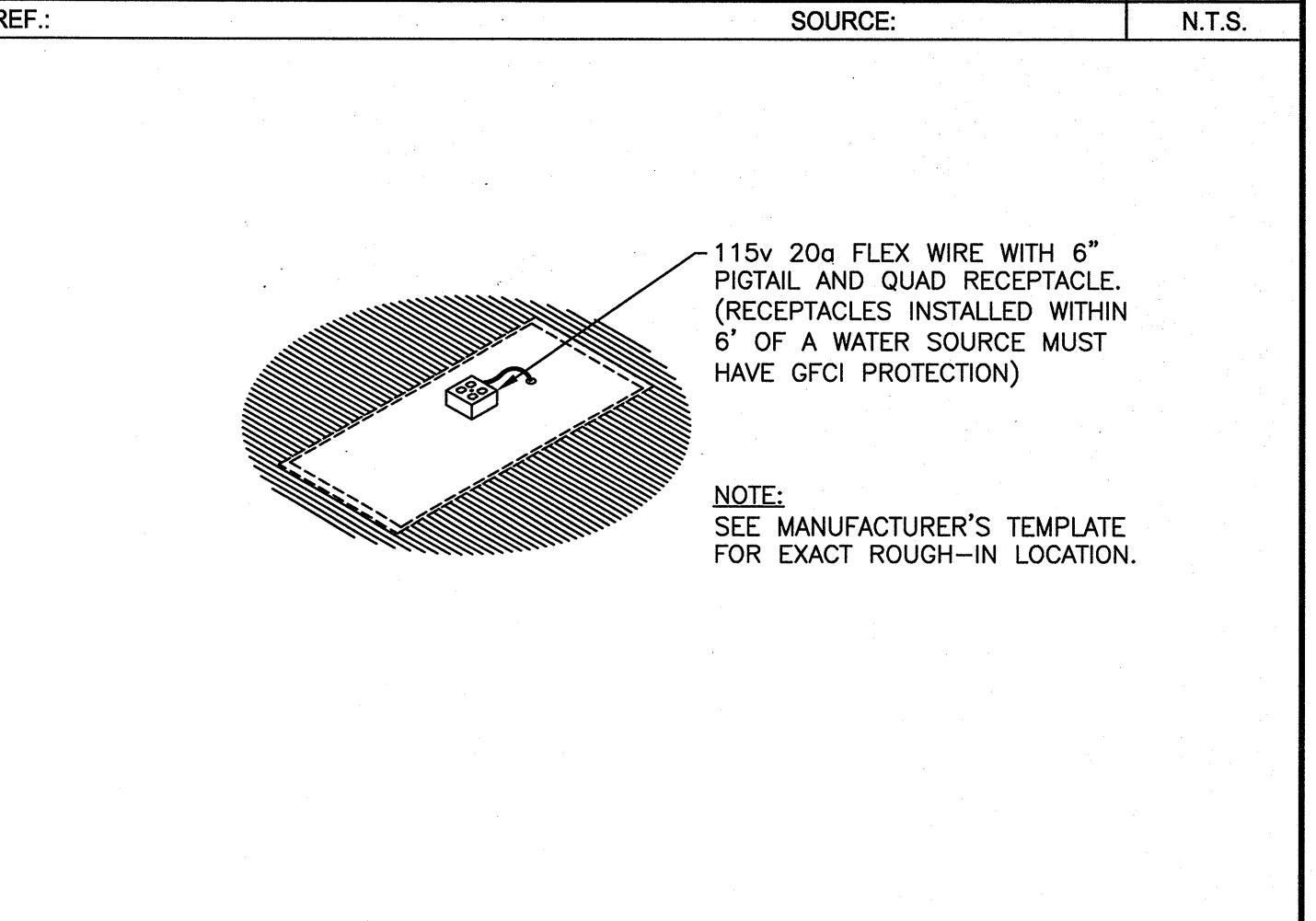
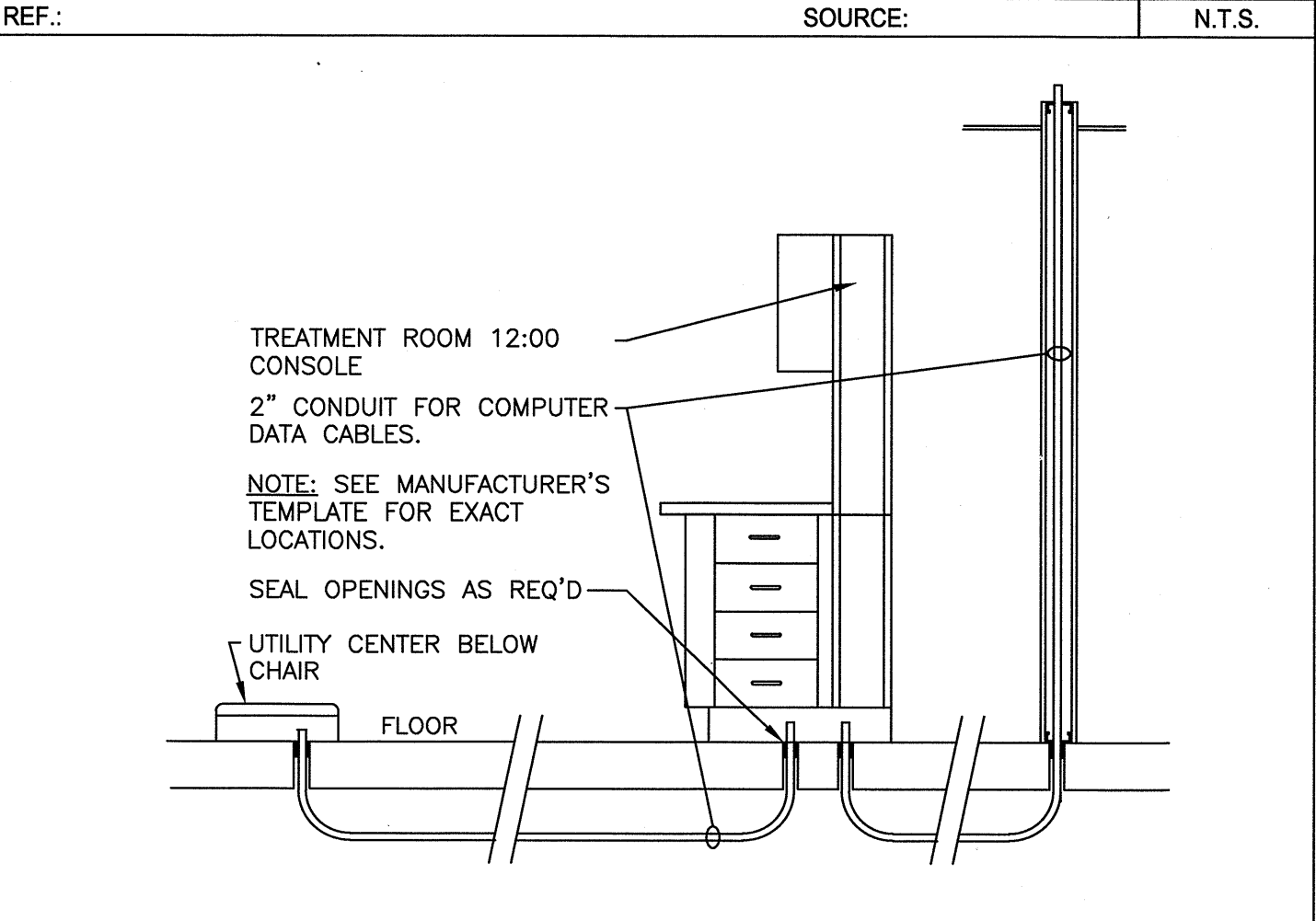
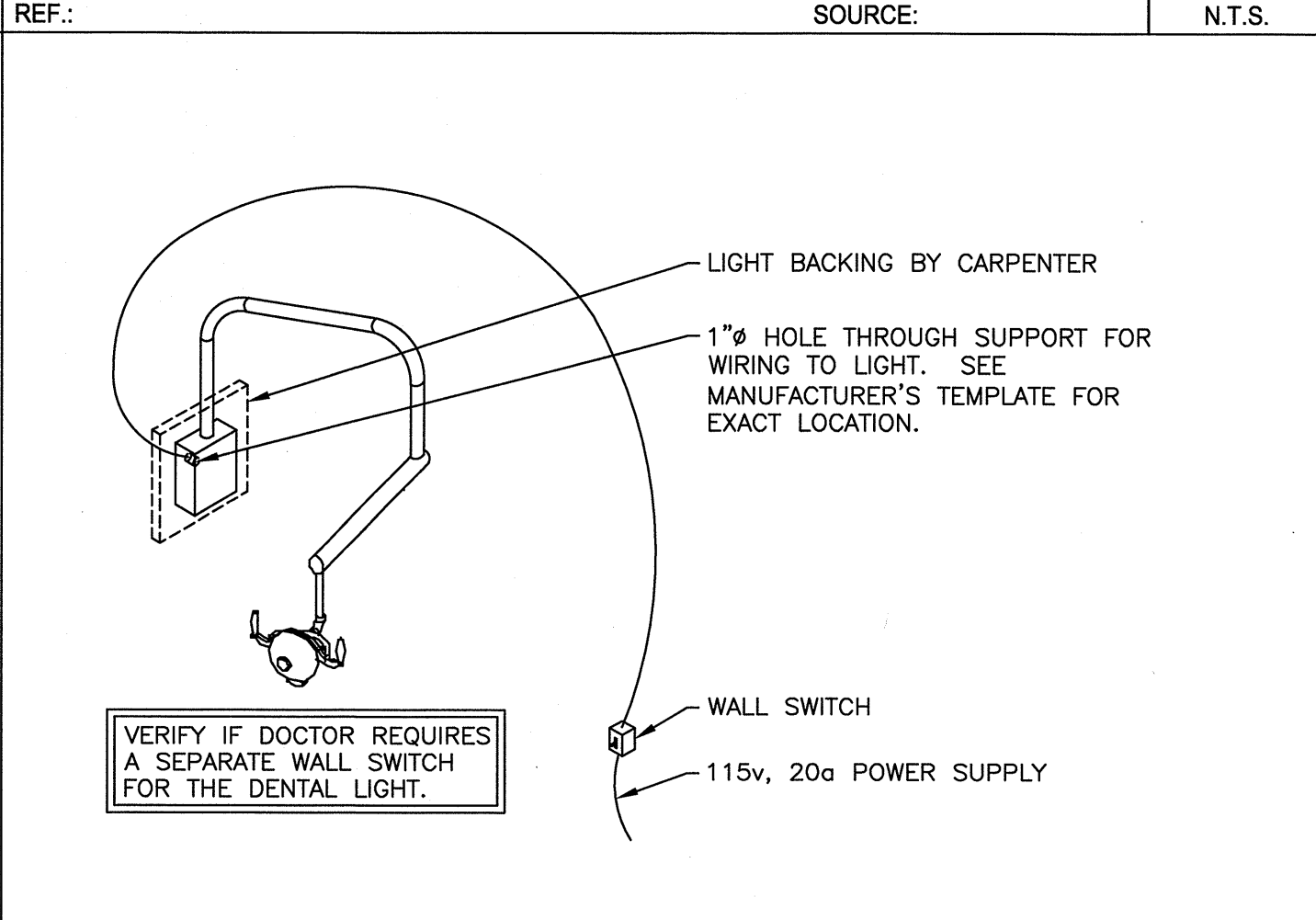
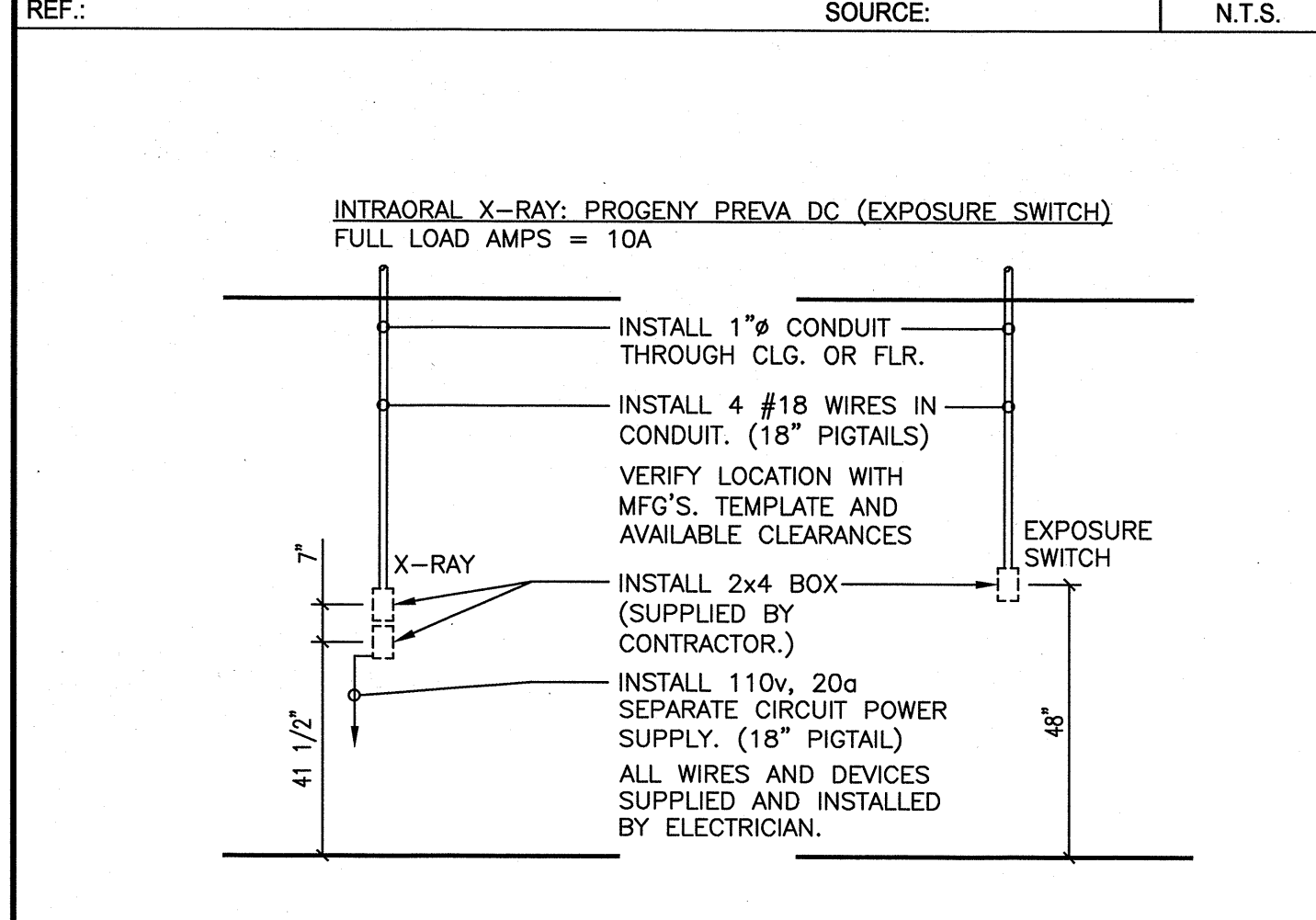


DETAIL - MEDICAL GAS ALARM WIRING 05

DETAIL - PANORAMIC X-RAY WIRING 06

DETAIL - REAR CABINET RECEPTACLE 07

DETAIL - DENTAL CHAIR RECEPTACLE 08

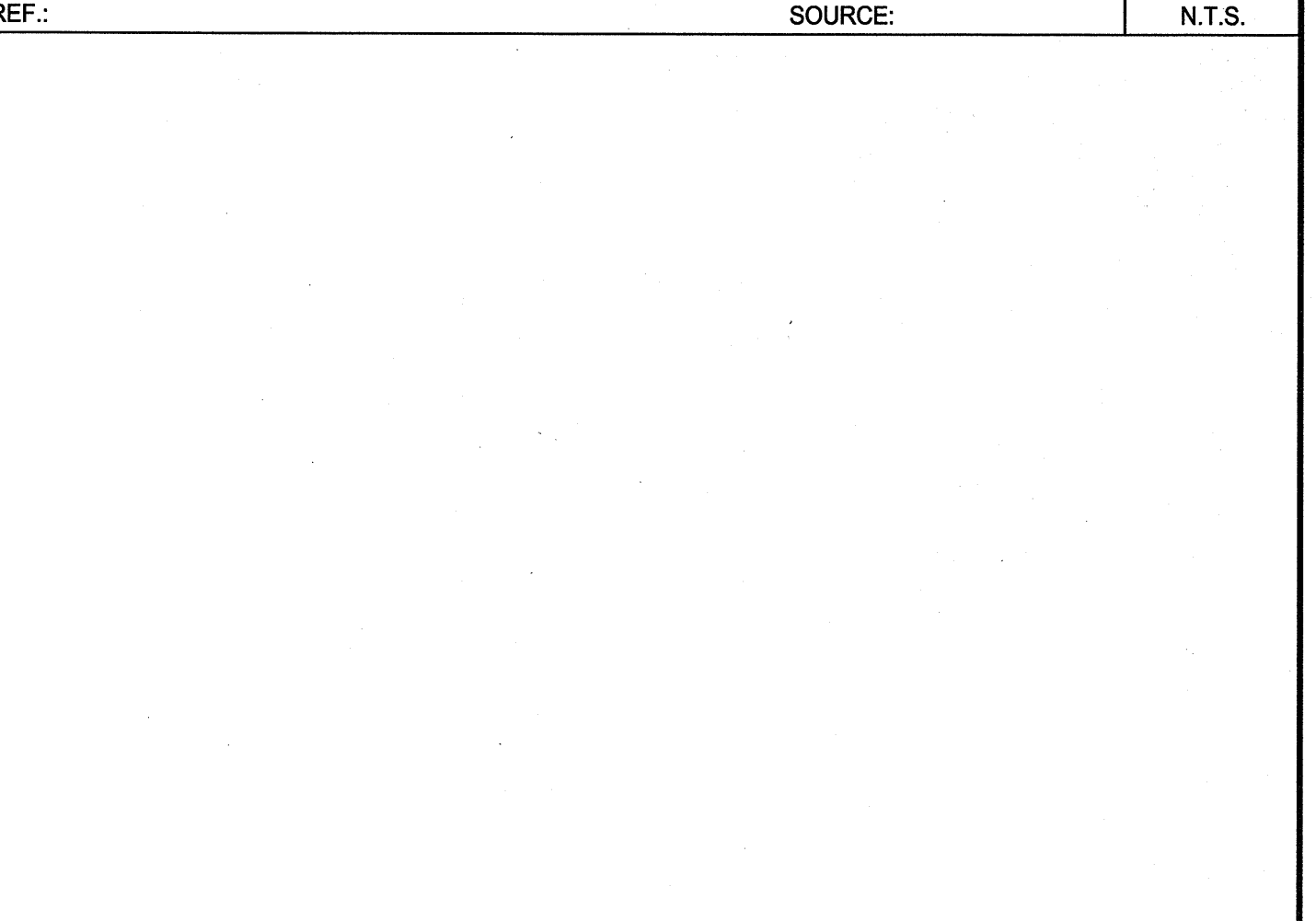
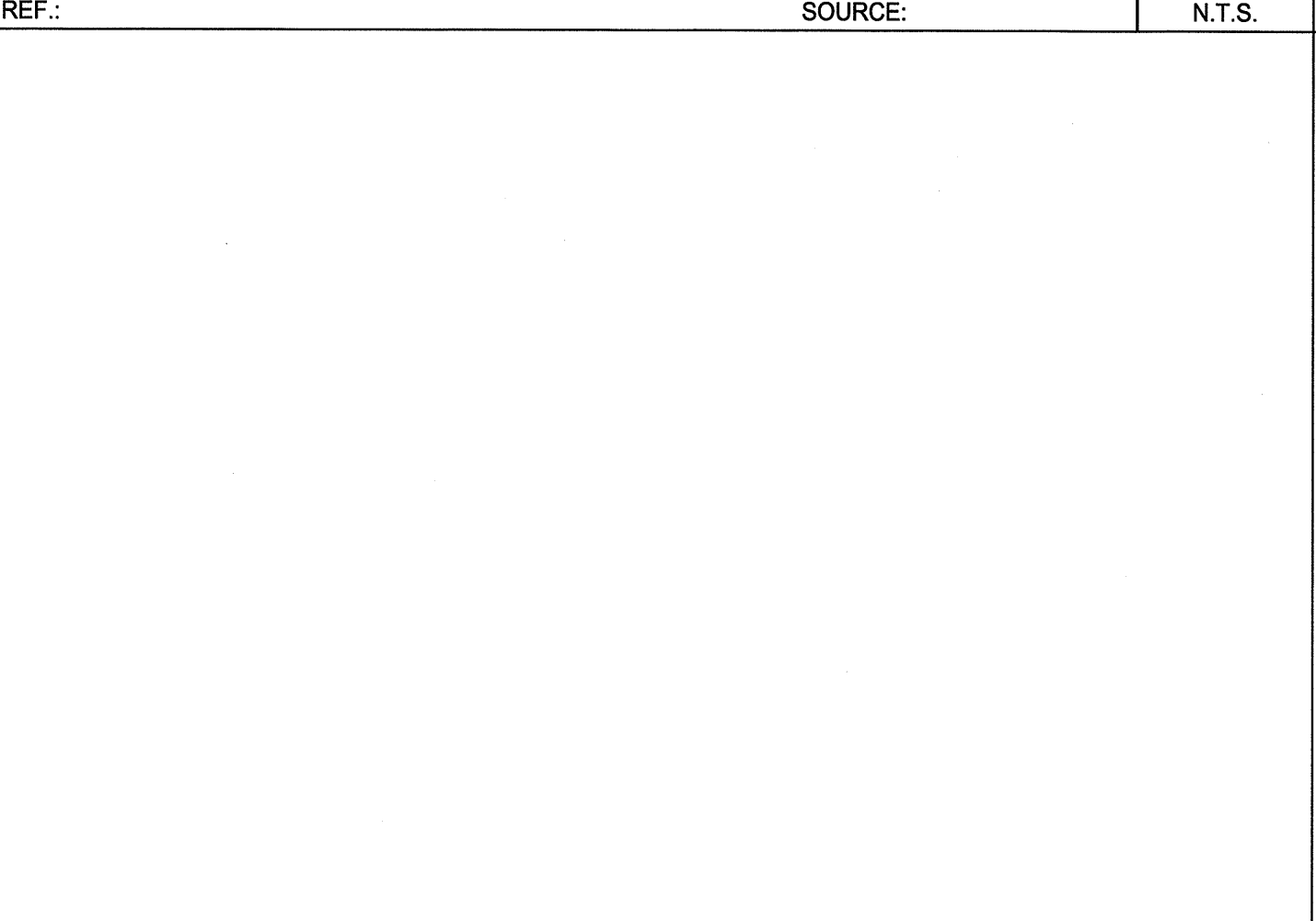
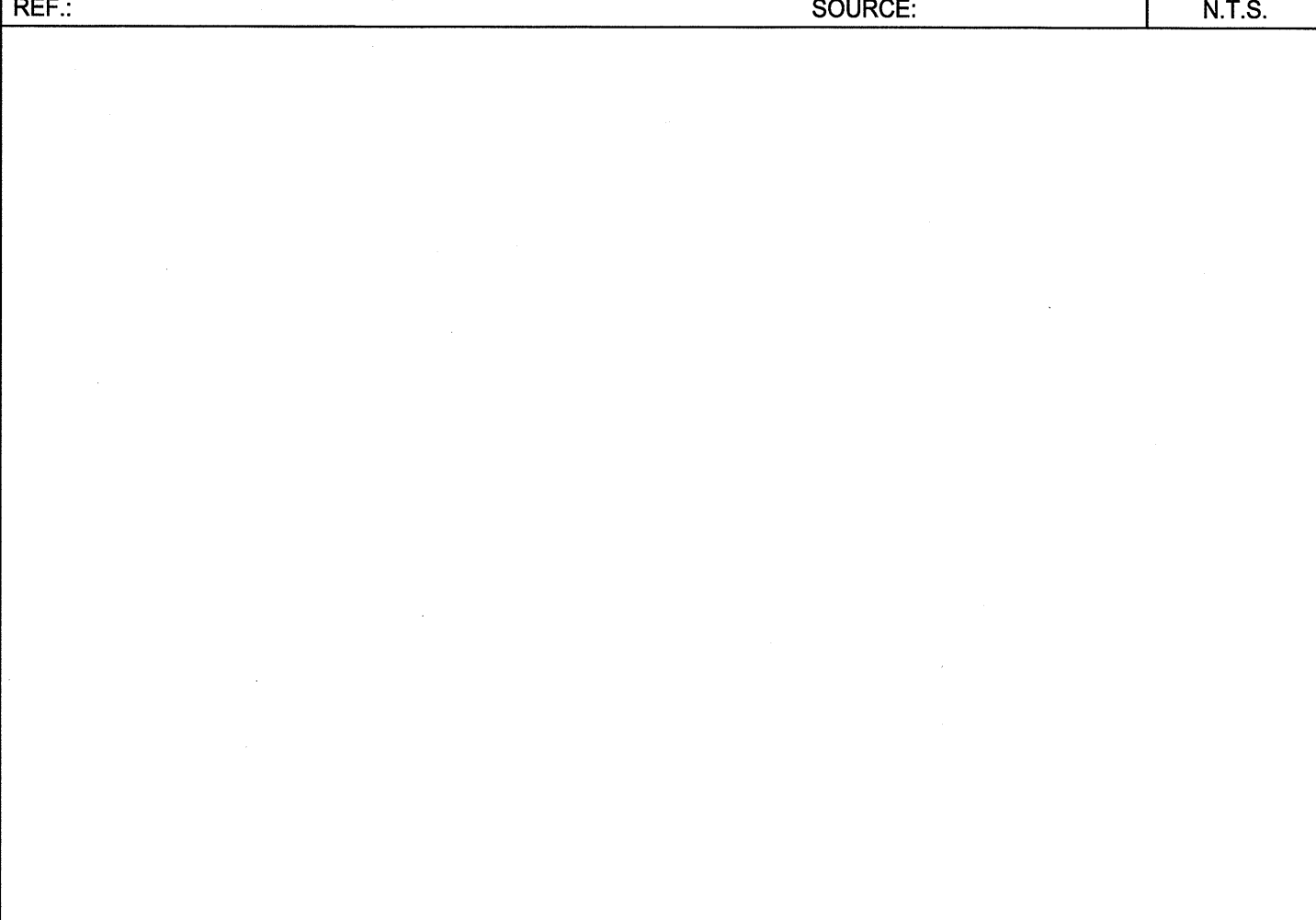
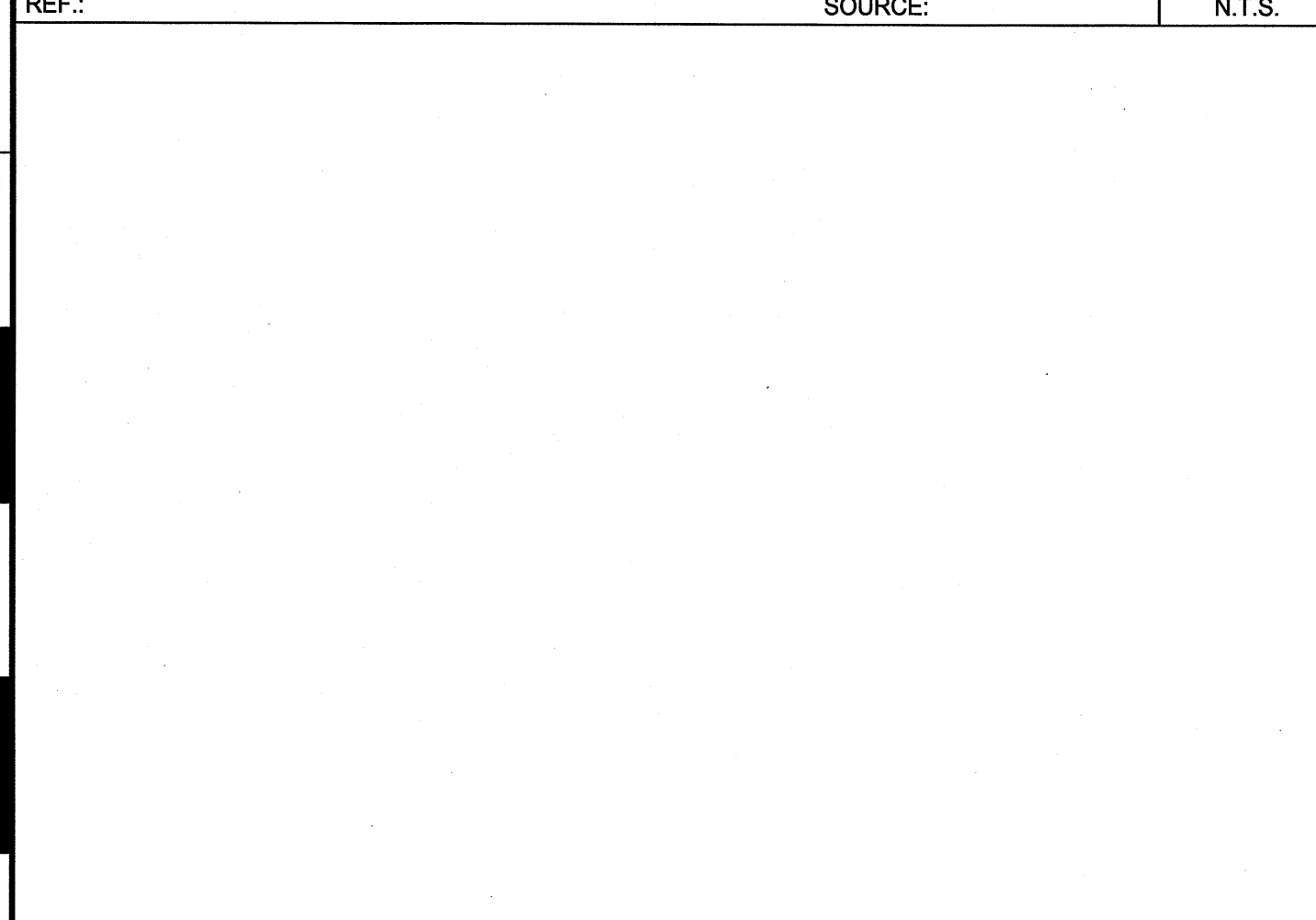


DETAIL - INTRAORAL X-RAY WIRING 09

DETAIL - WALL MOUNTED LIGHT WIRING 10

DETAIL - TYP. TREATMENT ROOM CONDUITS 11

DETAIL - STERILIZATION CABINET RECEPTACLE 12



DETAIL 13

DETAIL 14

DETAIL 15

DETAIL 16

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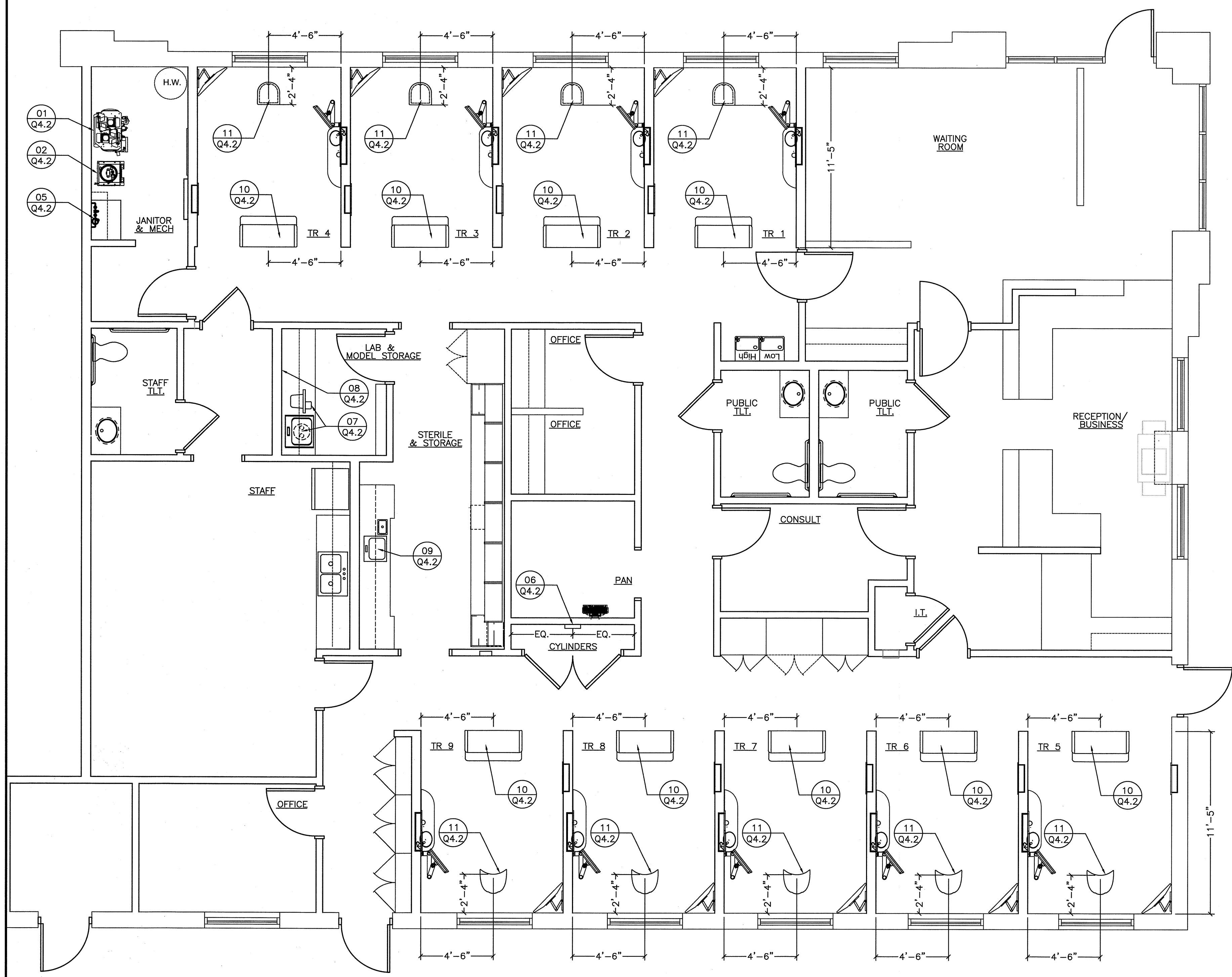
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DESIGN

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| DENTAL ELECTRICAL DETAILS | |
| SHEET: | |
| Q3.2 | |





PLUMBING NOTES

1. THE PLUMBER WILL SUPPLY AND INSTALL A WATER PRESSURE REGULATOR ON INCOMING WATER SUPPLY. THE PLUMBER WILL SET THE REGULATOR NOT TO EXCEED 65 PSI.
2. THE PLUMBER WILL INSTALL THE WATER FILTER (AND THE WATER SOFTENER, AS NEEDED) ON THE COLD WATER MAIN ENTERING THE DENTAL SUITE. THE WATER FILTER WILL BE SUPPLIED BY EITHER BENCO DENTAL OR THE DOCTOR.
3. THE PLUMBER WILL SUPPLY AND INSTALL SEPARATE MANUAL SHUT-OFF VALVES ON ALL SINKS, DENTAL UNITS, AND OUTLETS REQUIRING WATER AND/OR AIR.
4. ALL SINKS AND FAUCETS WILL BE CONNECTED BY THE PLUMBER.
5. ALL PIPES WILL BE CONCEALED WITHIN THE WALLS AND/OR THE FLOOR, UNLESS OTHERWISE NOTED ON THE BENCO DRAWINGS.
6. THE PLUMBER WILL SEAL ALL PENETRATIONS THROUGH THE FLOOR WITH A FIRESTOP OR EQUIVALENT WATERPROOFING.
7. ALL PIPES WILL BE FLUSHED CLEAR OF ALL DEBRIS BY THE PLUMBER.
8. THE PLUMBER WILL BE ONSITE ON THE DAY(S) OF INSTALLATION TO WORK WITH THE BENCO REPRESENTATIVE ON THE FINAL HOOK-UP. THE PLUMBER WILL SUPPLY AND INSTALL ANY AND ALL MATERIALS INDICATED IN THE PLUMBING DETAILS SHOWN AND THE MANUFACTURER'S INSTALLATION INSTRUCTION SHEETS.
9. THE PLUMBER WILL PROVIDE AND INSTALL ALL WATER SAFETY DEVICES (I.E. CHECK VALVES, BACKFLOW PREVENTERS, ETC.) IN ACCORDANCE WITH LOCAL CODE.
10. THE PLUMBER WILL INSTALL COMPLETE AND MAKE FINAL HOOK-UP TO THE FOLLOWING DENTAL EQUIPMENT, SUPPLIED BY THE DOCTOR AND/OR BENCO DENTAL, INCLUDING, BUT NOT LIMITED TO:
 - AIR COMPRESSOR
 - VACUUM PUMP
 - AIR/WATER SEPARATORS
 - WATER CONTROL VALVE AND FILTER ASSEMBLY
11. AN ELECTRIC MASTER WATER CONTROL VALVE AND FILTER ASSEMBLY IS REQUIRED FOR ANY/ALL COLD WATER LINES FEEDING ALL DENTAL EQUIPMENT. THIS WATER CONTROL VALVE AND FILTER ASSEMBLY IS REQUIRED WHETHER SUPPLIED BY BENCO, THE DOCTOR, OR THE PLUMBER. THE PLUMBER IS TO VERIFY THE EXACT LOCATION OF THE WATER CONTROL VALVE AND FILTER ASSEMBLY WITH THE DOCTOR/OWNER, AND A BENCO REP AT THE TIME OF LAYOUT AND PRIOR TO EQUIPMENT SELECTION.
12. THE PLUMBER WILL COMPLY WITH ALL BENCO INSPECTIONS, AS NOTED IN THE GENERAL NOTES ON THE FIRST PAGE OF THESE DOCUMENTS.
13. GENERAL DENTAL PLUMBING LINES SHOWN ARE FOR GRAPHICALLY DISPLAYING ORIGIN AND TERMINATION POINTS. FIELD CONDITIONS MAY ALTER PLUMBING LINE LAYOUT, PER PLUMBERS DISCRETION. THE FINAL LAYOUT OF THE PLUMBING LINES IS THE RESPONSIBILITY OF THE PLUMBER.
14. THE APPLICATION OF DENTAL COMPRESSED AIR AS NOTED ON THIS PLAN IS NOT USED FOR LIFE-SUPPORT PURPOSES SUCH AS RESPIRATORS, IPPB MACHINES, ANALGESIA, ANESTHESIA, AND SO FORTH. IT IS ONLY USED AS INCIDENTAL AIR DISCHARGED INTO THE ORAL CAVITY AND NOT A PRIMARY SOURCE OF AIR TO SUSTAIN LIFE.

MEDICAL GAS NOTES (IF APPLICABLE)

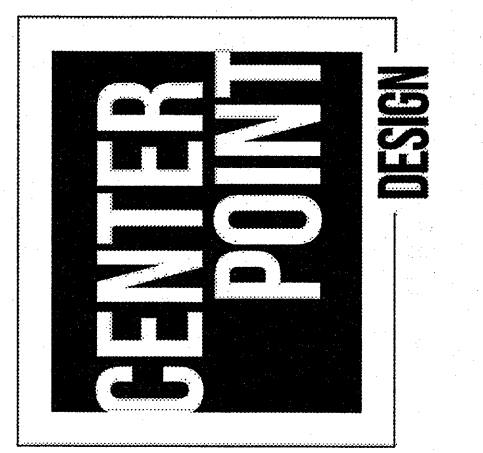
1. ENGINEER AND CONTRACTOR TO FOLLOW ALL APPLICABLE DESIGN AND INSTALLATION PROCEDURES AS LISTED UNDER NFPA #99C LEVEL 3 (MEDICAL GASES).
2. ALL MEDICAL GAS AND VACUUM PIPING LOCATED WITHIN FLOOR SLABS AND UNDERGROUND WITHIN BUILDINGS SHALL BE:
 - a. INSTALLED IN ONE (OR MORE) CONTINUOUS CONDUITS THAT ARE OF SUFFICIENT SIZE TO PERMIT SUBSEQUENT INSTALLATION, REMOVAL AND REPLACEMENT OF THE GAS AND/OR VACUUM LINES.
 - b. EACH TUBE PULLED INTO THE CONDUIT SHALL BE A CONTINUOUS LENGTH HAVING NO JOINTS WITHIN THE CONDUIT.
3. ALL TUBING SHALL BE COPPER TYPE 'K' OR 'L'. ENTIRE SYSTEM SHALL BE PRESSURE TESTED AT 150 PSI FOR 24 HOURS. PRESSURE TEST CAN ONLY BE PERFORMED WITH NITROGEN, NOT COMPRESSED AIR. ALL JOINTS MUST BE BRAZED AS PER CODE.
4. MEDICAL GAS CLOSETS NEED TO BE VENTED TO OUTSIDE AIR. (CHECK LOCAL CODES IF REQUIRED)
5. WHEN (4) OR MORE TREATMENT ROOMS ARE EQUIPPED WITH MEDICAL GAS, THE DENTAL SUITE MUST BE EQUIPPED WITH A SPRINKLER SYSTEM. (CHECK LOCAL CODES IF REQUIRED)

ALL SINKS BY OTHERS

1 DENTAL PLUMBING PLAN
SCALE: 1/4" = 1'-0"



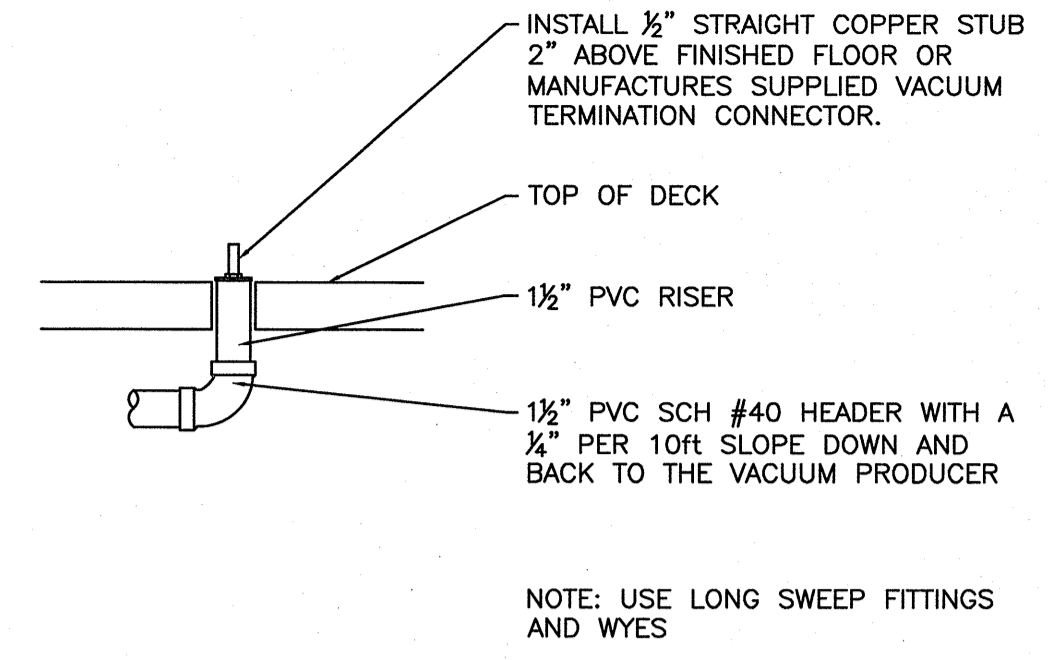
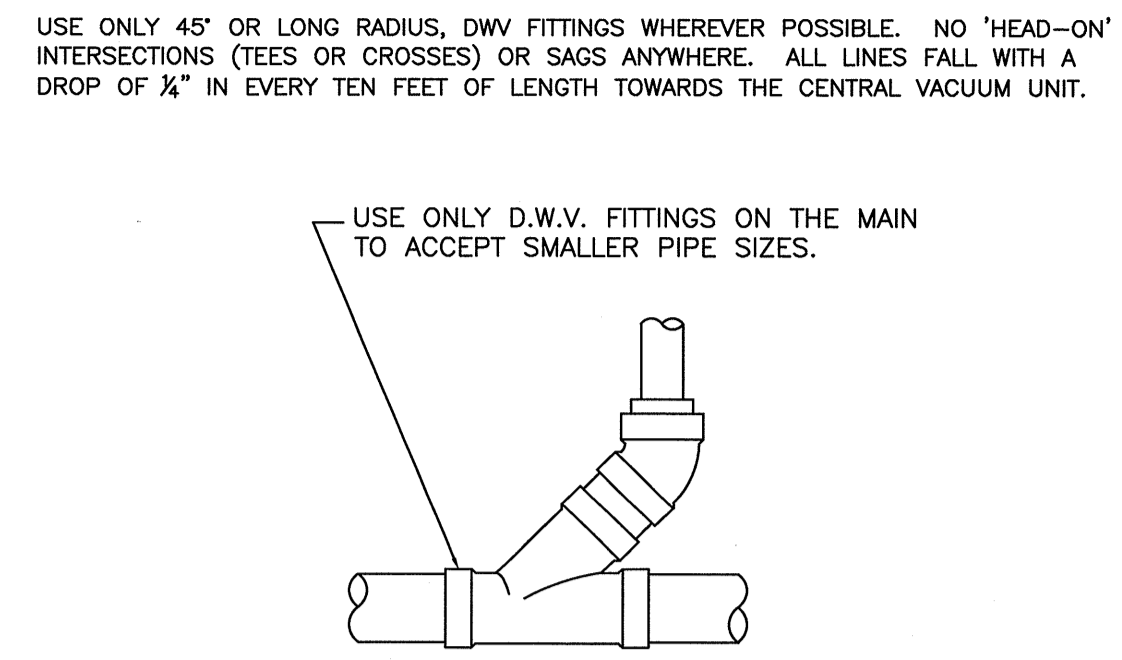
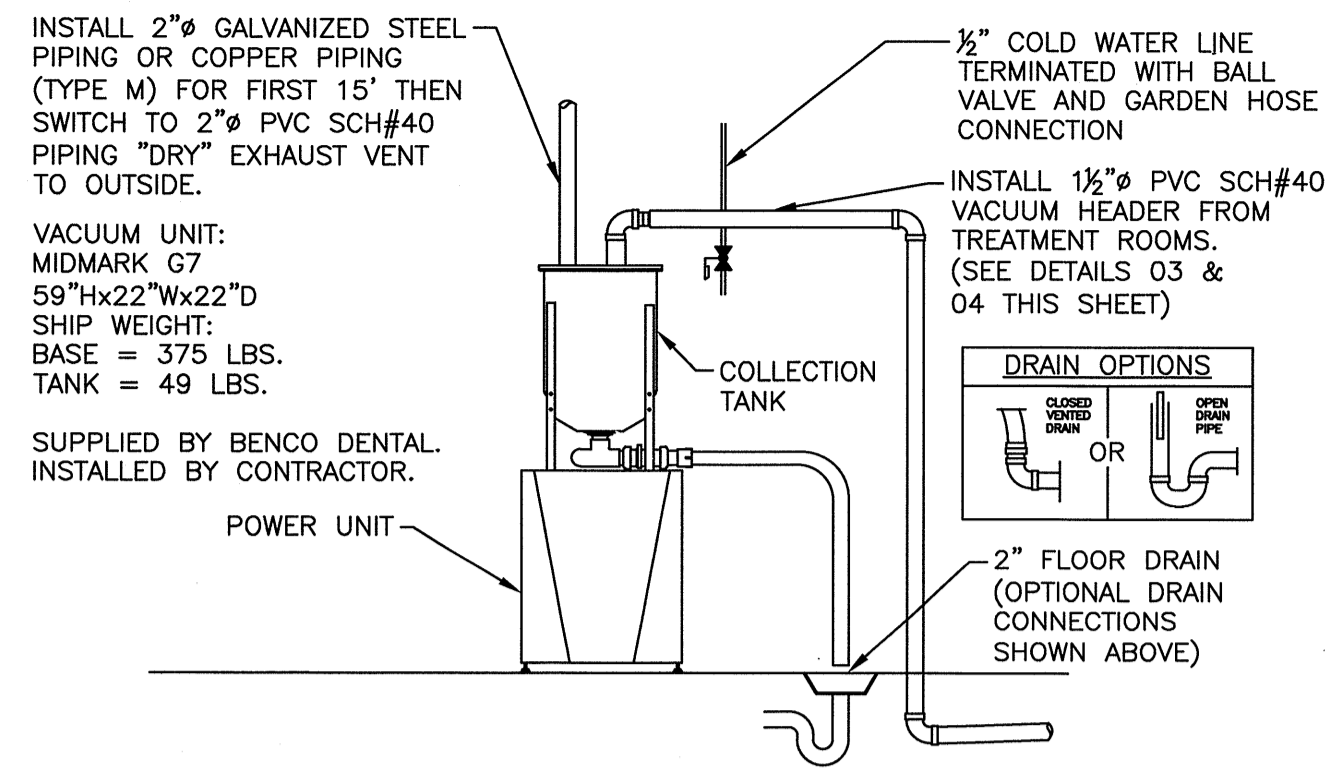
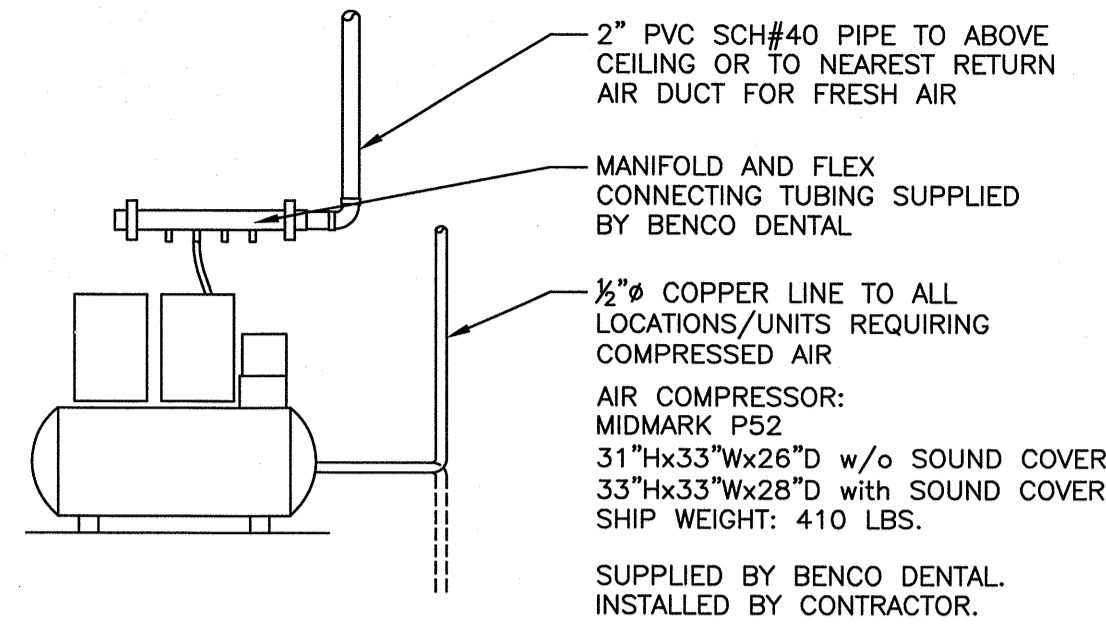
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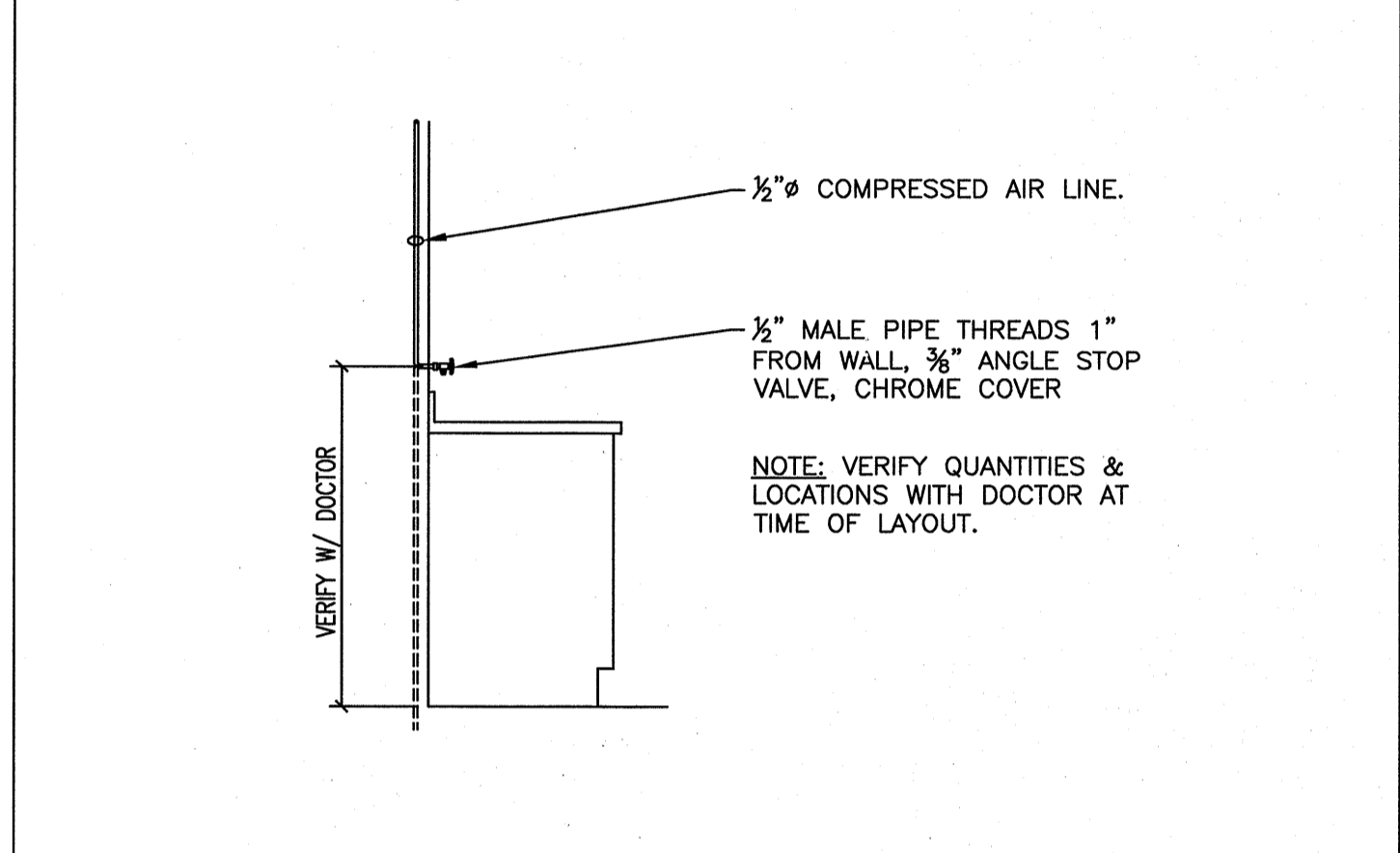
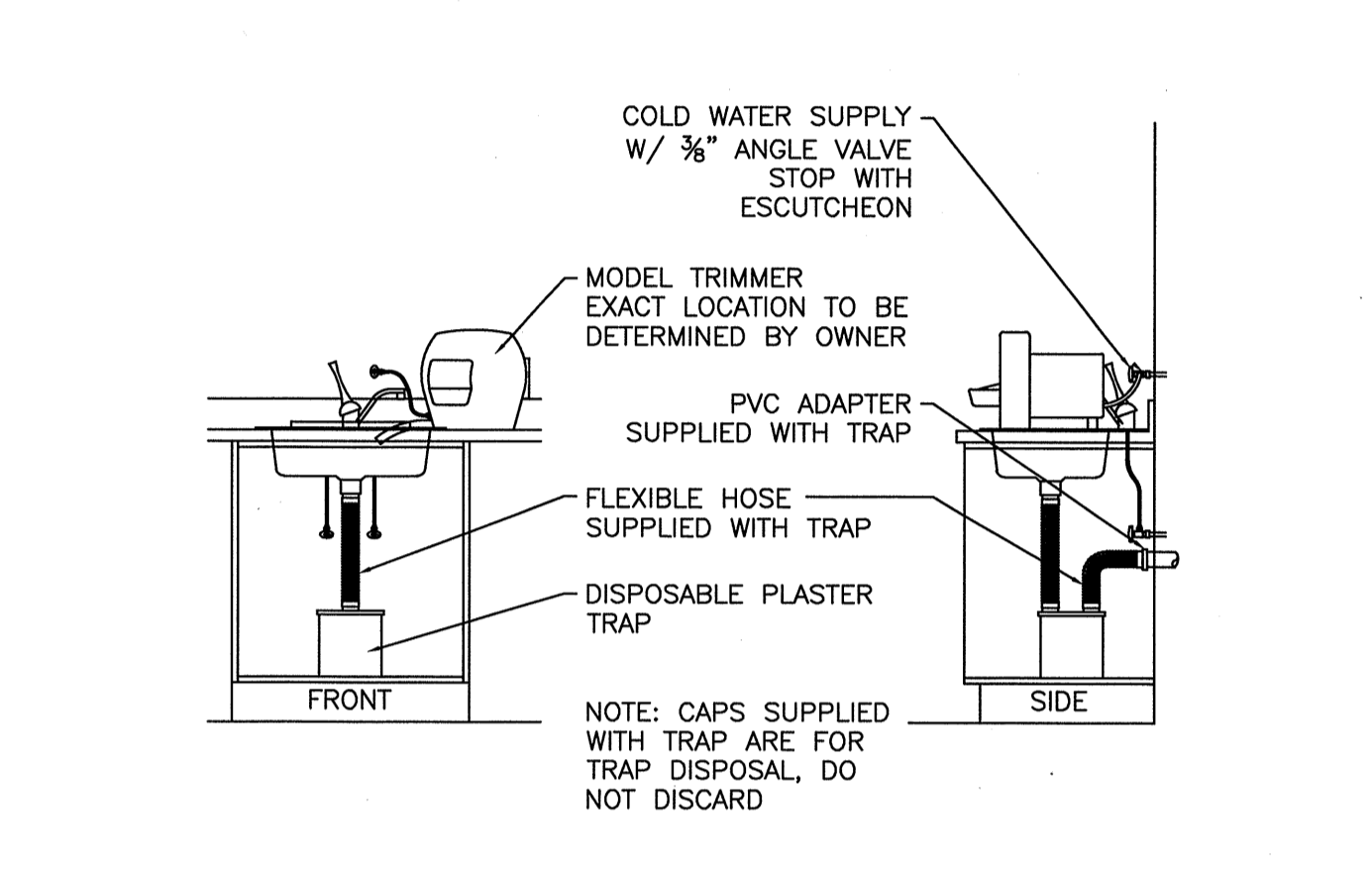
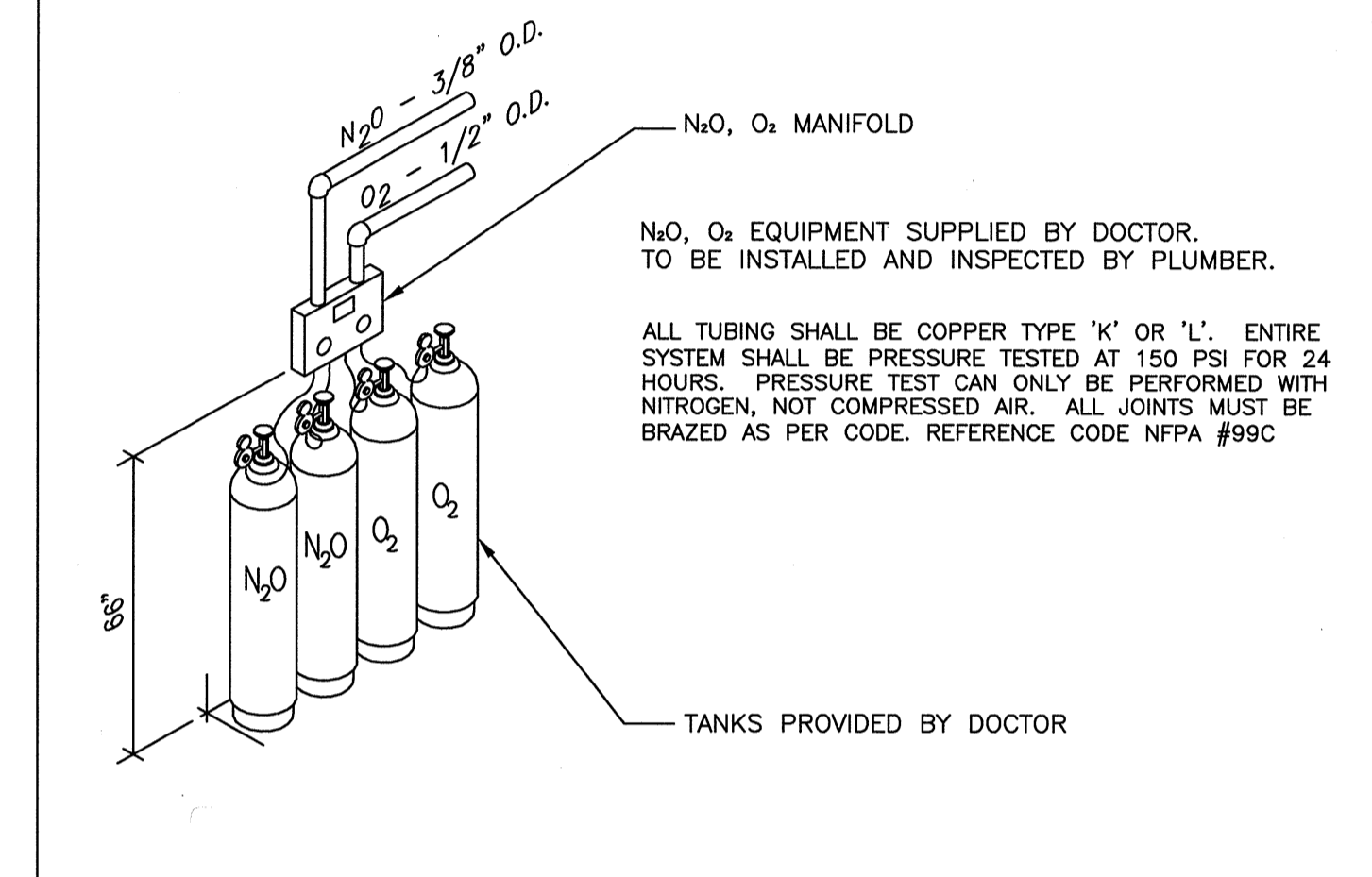
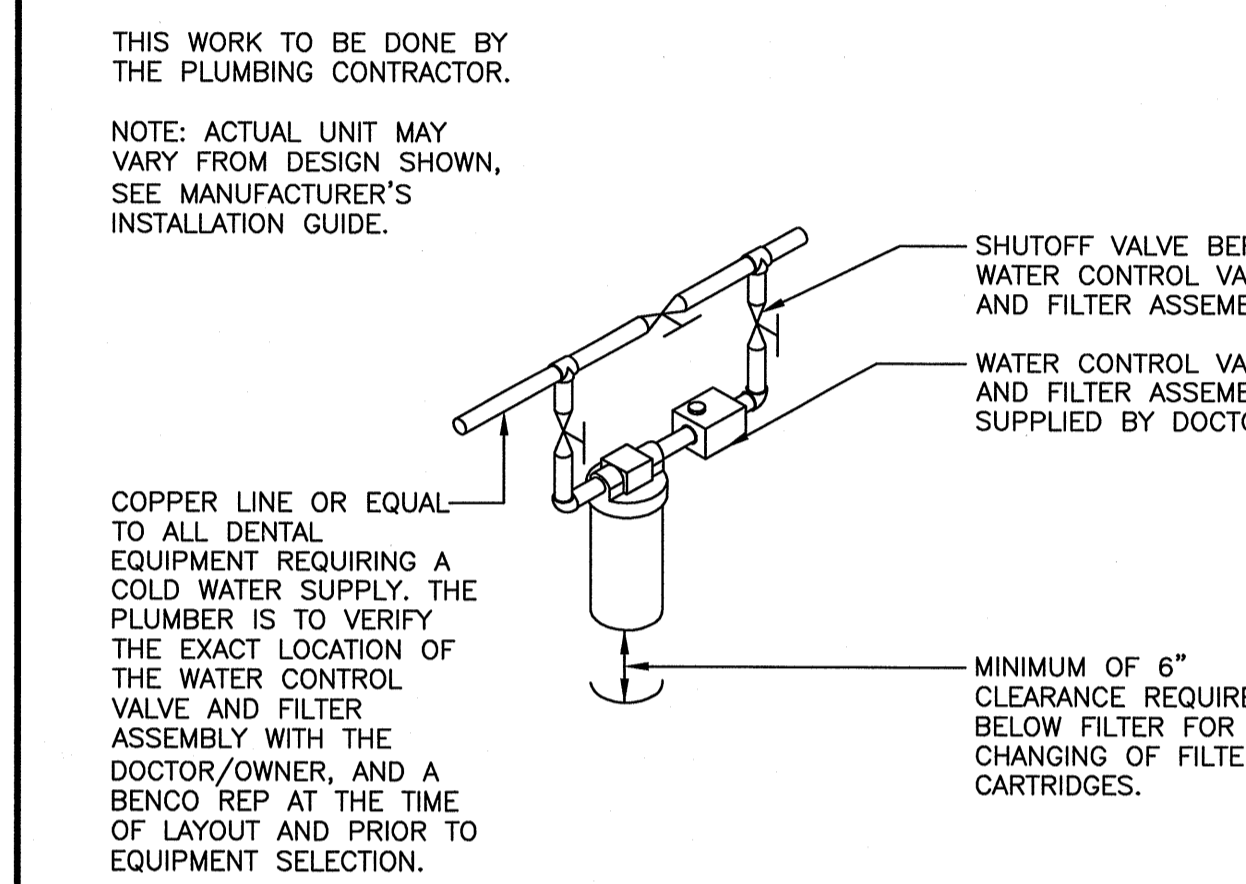


DETAIL - AIR COMPRESSOR
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DETAIL - VACUUM PUMP
REF.: SOURCE: N.T.S.

DETAIL - VACUUM PIPING
REF.: SOURCE: N.T.S.

DETAIL - VACUUM PIPING
REF.: SOURCE: N.T.S.

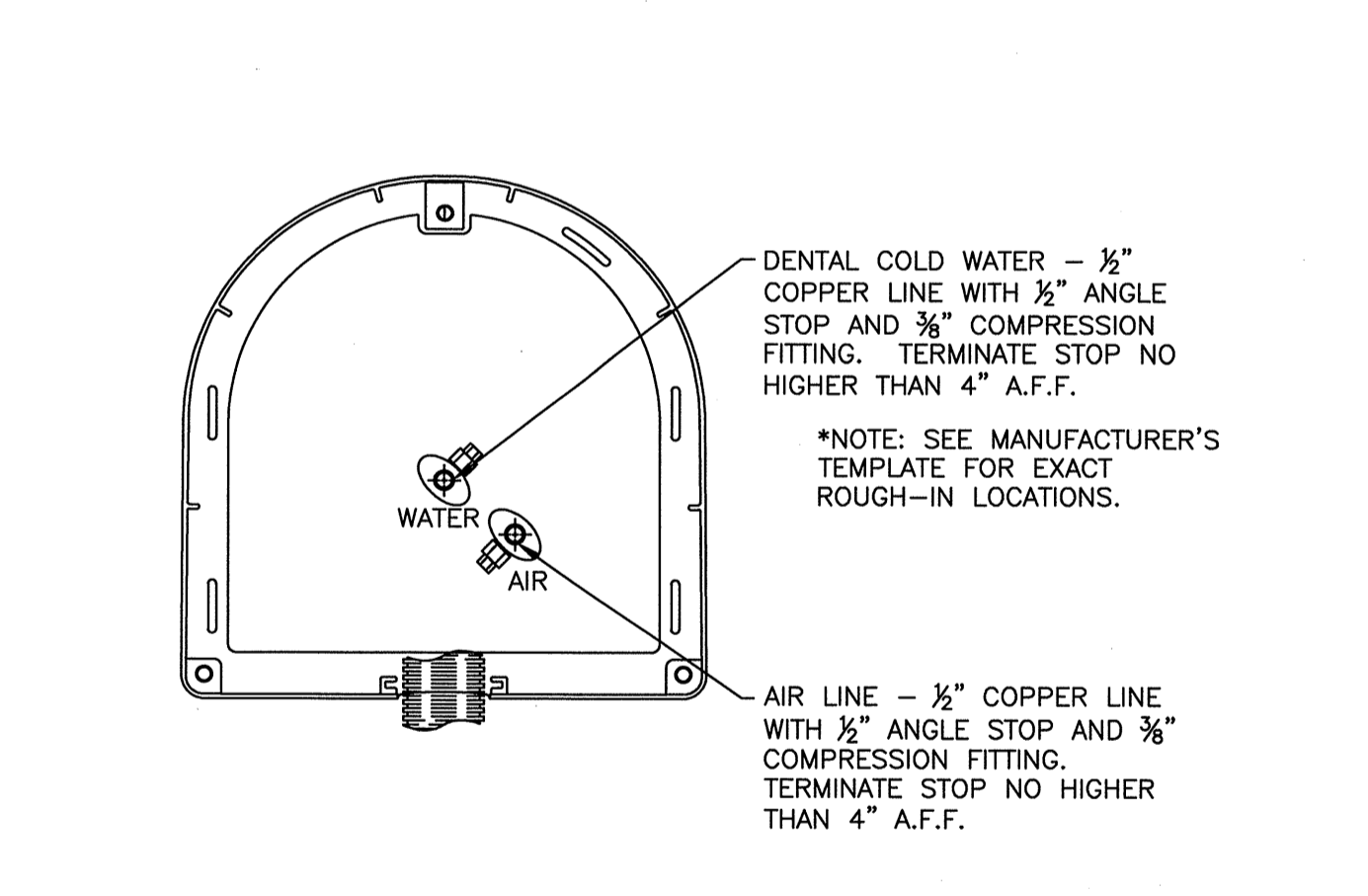
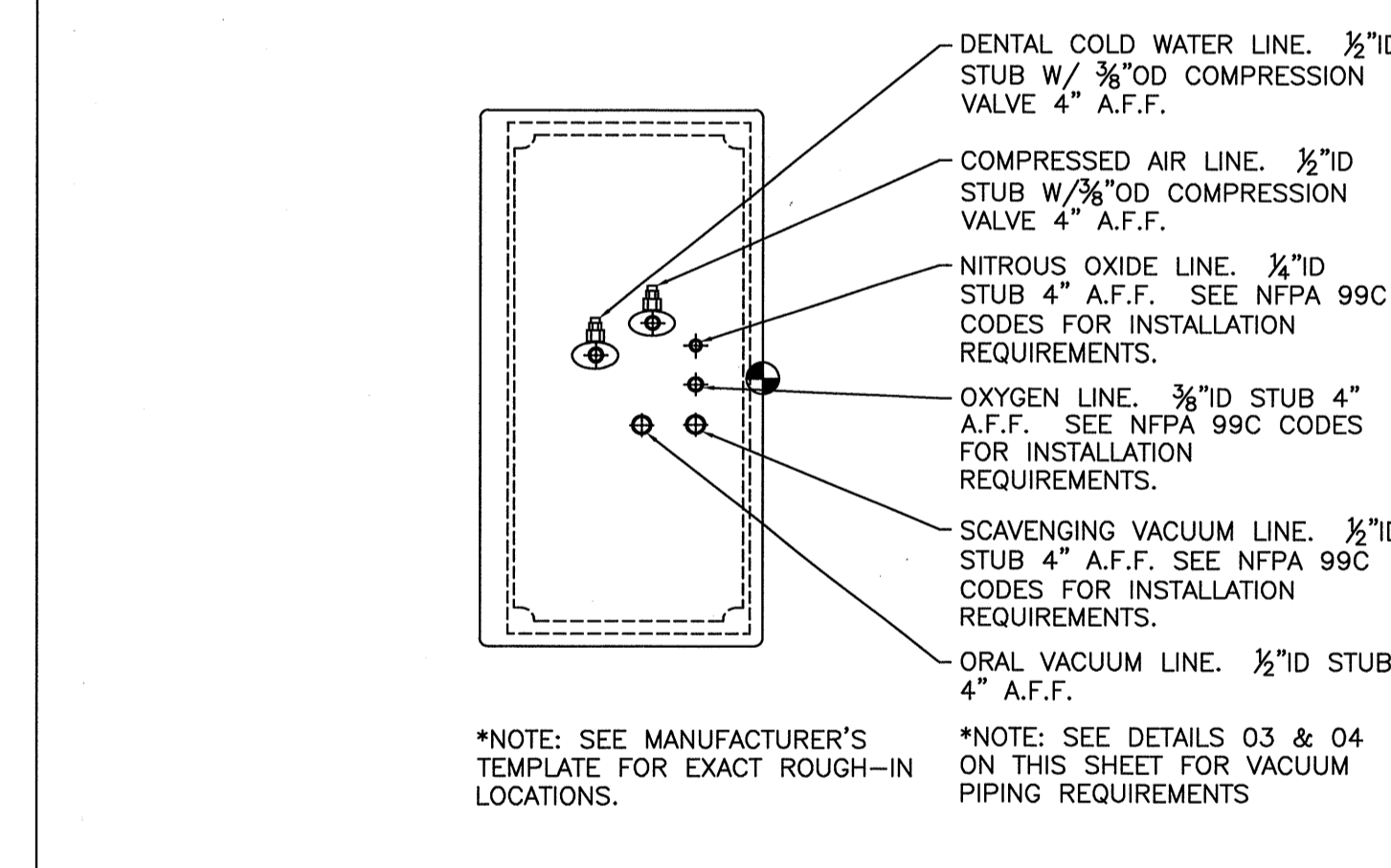
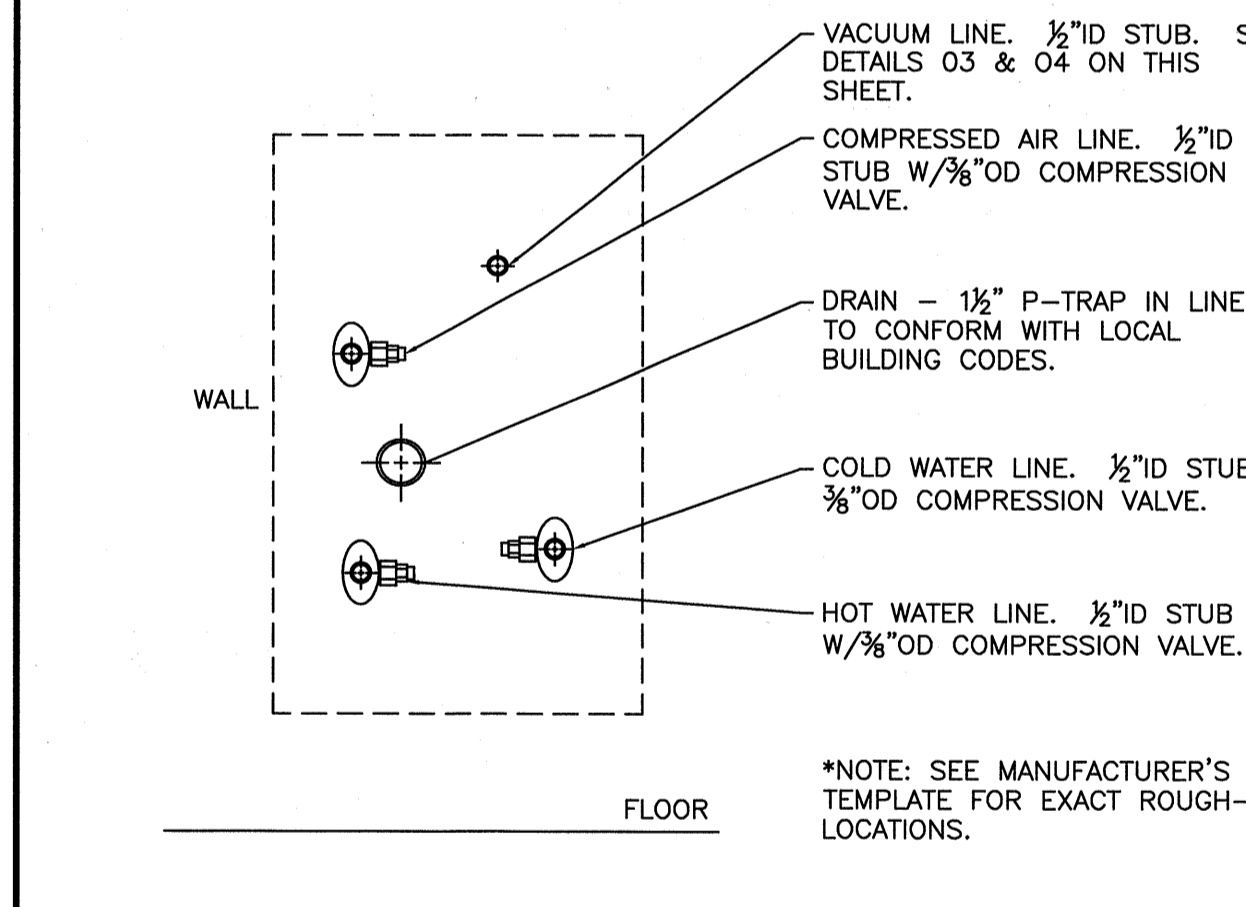


DETAIL - WATER CONTROL VALVE
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DETAIL - MEDICAL GAS PIPING DIAGRAM
REF.: SOURCE: N.T.S.

DETAIL - MODEL TRIMMER / PLASTER TRAP
REF.: SOURCE: N.T.S.

DETAIL - TYPICAL AIR OUTLET
REF.: SOURCE: N.T.S.



DETAIL - STERILIZATION CABINET PIPING
REF.: SOURCE: N.T.S.

DETAIL - TYPICAL REAR CABINET PIPING
REF.: SOURCE: N.T.S.

DETAIL - TYPICAL UTILITY CENTER
REF.: SOURCE: N.T.S.

DETAIL
REF.: SOURCE: N.T.S.

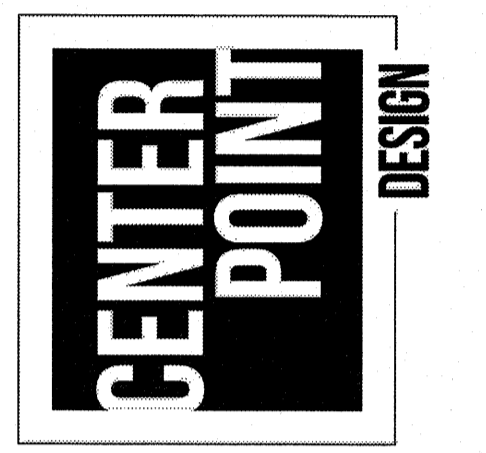
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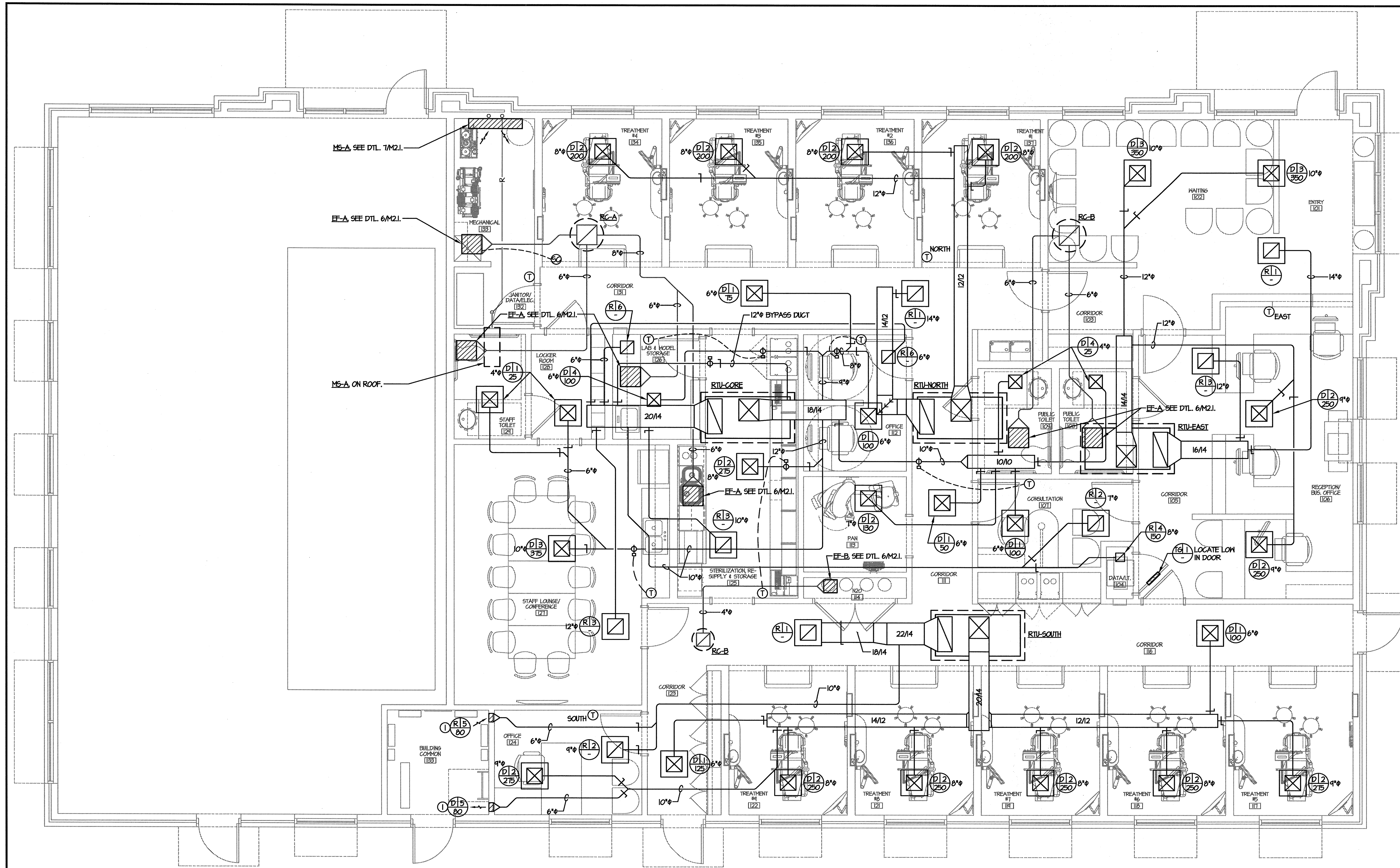


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| SHEET: | |
| Q4.2 | |





HVAC PLAN
 1/4" = 1'-0"

LEGEND

- KEYED NOTE
- CONNECT TO EXISTING AT THIS POINT
- CEILING SUPPLY DIFFUSER
- CEILING RETURN OR EXHAUST GRILLE
- RECTANGULAR DUCT WITH TURNING VANES
- SUPPLY DUCT, ELBOW UP
- SUPPLY DUCT, ELBOW DOWN
- RETURN OR EXHAUST DUCT, ELBOW UP
- RETURN OR EXHAUST DUCT, ELBOW DOWN
- RECTANGULAR DUCT TO ROUND DUCT TRANSITION
- WALL THERMOSTAT MOUNTED @ 48" AFF.
- RELATIVE HUMIDITY SENSOR @ 54" AFF.
- SPEED CONTROL
- IN-DUCT ZONE DAMPER, SIZE TO MATCH CONNECTED DUCT SIZE.
- BALANCE DAMPER WITH LOCKING MANUAL HANDLE OPERATOR
- R REFRIGERANT LINE SET
- CD CONDENSATE DRAIN LINE
- AD ACCESS DOOR
- AFF ABOVE FINISH FLOOR

NOTES

1. ALL WORK SHALL COMPLY WITH THE LATEST EDITION OF THE "ARKANSAS MECHANICAL CODE". INSTALLATION TO ALSO COMPLY W/ CITY REQUIREMENTS.
2. SEE ARCHITECTURAL REFLECTED CEILING PLAN FOR EXACT LOCATION OF AIR DEVICES.
3. VISIT SITE & REVIEW EXISTING CONDITIONS BEFORE BIDDING.
4. DUCTWORK TO BE COORDINATED WITH STRUCTURAL, ELECTRICAL AND GENERAL CONSTRUCTION. BEFORE FABRICATING DUCTWORK VISIT BUILDING & MAKE FIELD MEASUREMENTS. PROVIDE OFF-SETS, TRANSITIONS & CHANGE DUCT SHAPE WHERE REQUIRED TO FIT IN AVAILABLE SPACE. REVISED DUCT SHAPES SHALL HAVE EQUAL FRICTION PRESSURE LOSS.
5. UNLESS OTHERWISE INDICATED, ALL ROUND SUPPLY, RETURN, EXHAUST AND OUTSIDE DUCTS SHALL BE EXTERNALLY WRAPPED WITH 2" FIBERGLASS INSULATION WITH FOIL-SCRIM-KRAFT VAPOR BARRIER.
6. UNLESS OTHERWISE INDICATED, ALL RECTANGULAR DUCT SHALL BE 1" LINED WITHOUT DUCT WRAP. INSIDE CLEAR DIMENSIONS ARE INDICATED. INCREASE SHEETMETAL DIMENSIONS TO ACCOUNT FOR LINER THICKNESS.
7. MAINTAIN 10'-0" MINIMUM CLEARANCE BETWEEN OSA INTAKES AND ALL EXHAUST FANS, FLUES, PLUMBING VENTS, AND OTHER ODOR SOURCES.
8. ALL BRANCH DUCTS CONNECTED TO AN AIR DEVICE SHALL HAVE A LOCKING QUADRANT MANUAL BALANCING DAMPERS.
9. ABOVE ACCESSIBLE CEILING FLEXIBLE DUCT MAY BE USED AT AIR DEVICE CONNECTIONS. LENGTH NOT TO EXCEED 6'-0".
10. REFER TO THE PROJECT MANUAL FOR ALL REQUIREMENTS.

CONTROL NOTES & SEQUENCES

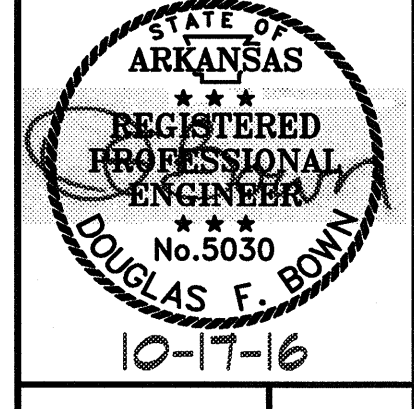
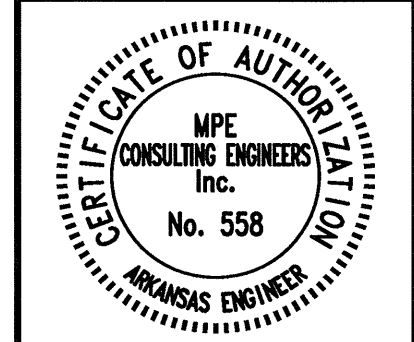
1. UNLESS OTHERWISE NOTED, HVAC SYSTEMS TO BE CONTROLLED PER MANUFACTURER'S RECOMMENDATIONS. PROGRAM THERMOSTATS AS PER OWNER'S INSTRUCTIONS. STOP SYSTEM IF DRAIN PAN IS FLOODED OR IF FIRE ALARM IS ACTIVATED.
2. SET THERMOSTATS FOR INTERMITTENT FAN OPERATION.
3. JANITOR LOUNGE, LAB/CORRIDOR & STERILIZATION EXHAUST FANS EACH TO BE CONTROLLED WITH A DEDICATED WALL SWITCH SEPARATE FROM ROOM LIGHT SWITCH. COORDINATE W/ ELECTRICAL.
4. EXHAUST FANS AT THE TOILET ROOMS TO OPERATE WITH THE ROOM LIGHT SWITCH. COORDINATE WITH ELECTRICAL.
5. OPERATE DOMESTIC HOT WATER CIRCULATOR W/ CORRIDOR LIGHTS. COORDINATE W/ ELECTRICAL.

KEYED NOTES

- ① LOCATE @ 10'-6" ABOVE FLOOR.

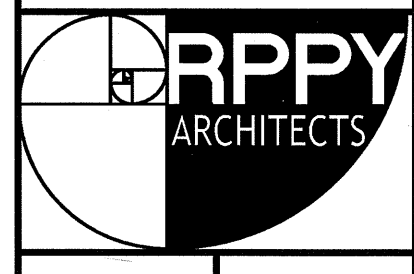
ROARK PERKINS PERRY YELVINGTON
 ARCHITECTURE • INTERIOR DESIGN
 719 W. SECOND STREET • LITTLE ROCK, AR 72201-2887
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Dental Clinic & Shell Building for Dr. Clint Fuiks
 Highway 5 Bryant, Arkansas



| REVISIONS | DATE |
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| | |

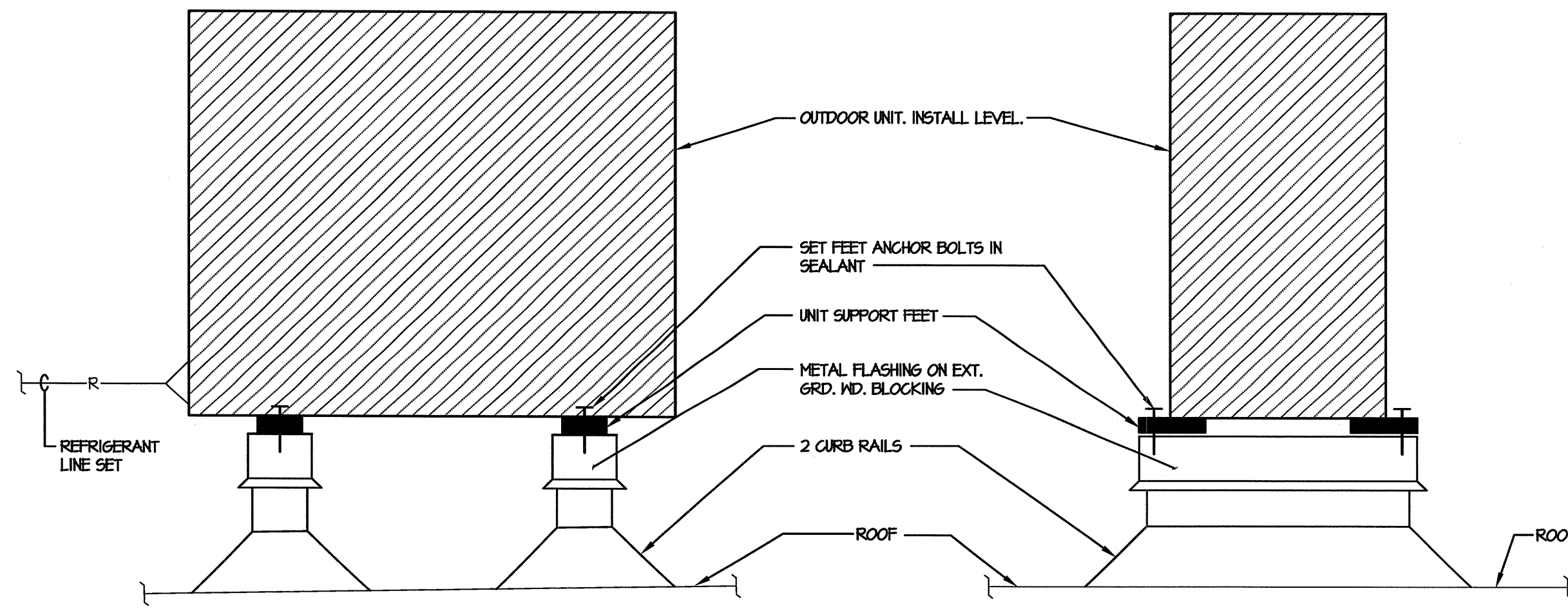
HVAC PLAN



| | |
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| 10-13-2016 | 1549 |
| DATE | JOB NO. |
| M1.1 | 3 |
| SHEET | OF |

MPE CONSULTING ENGINEERS, INCORPORATED
 40 SHACKLEFORD PLAZA, SUITE 200, LITTLE ROCK, ARKANSAS, 72201
 (501) 227-0101, TELEPHONE (501) 227-8353, FAX

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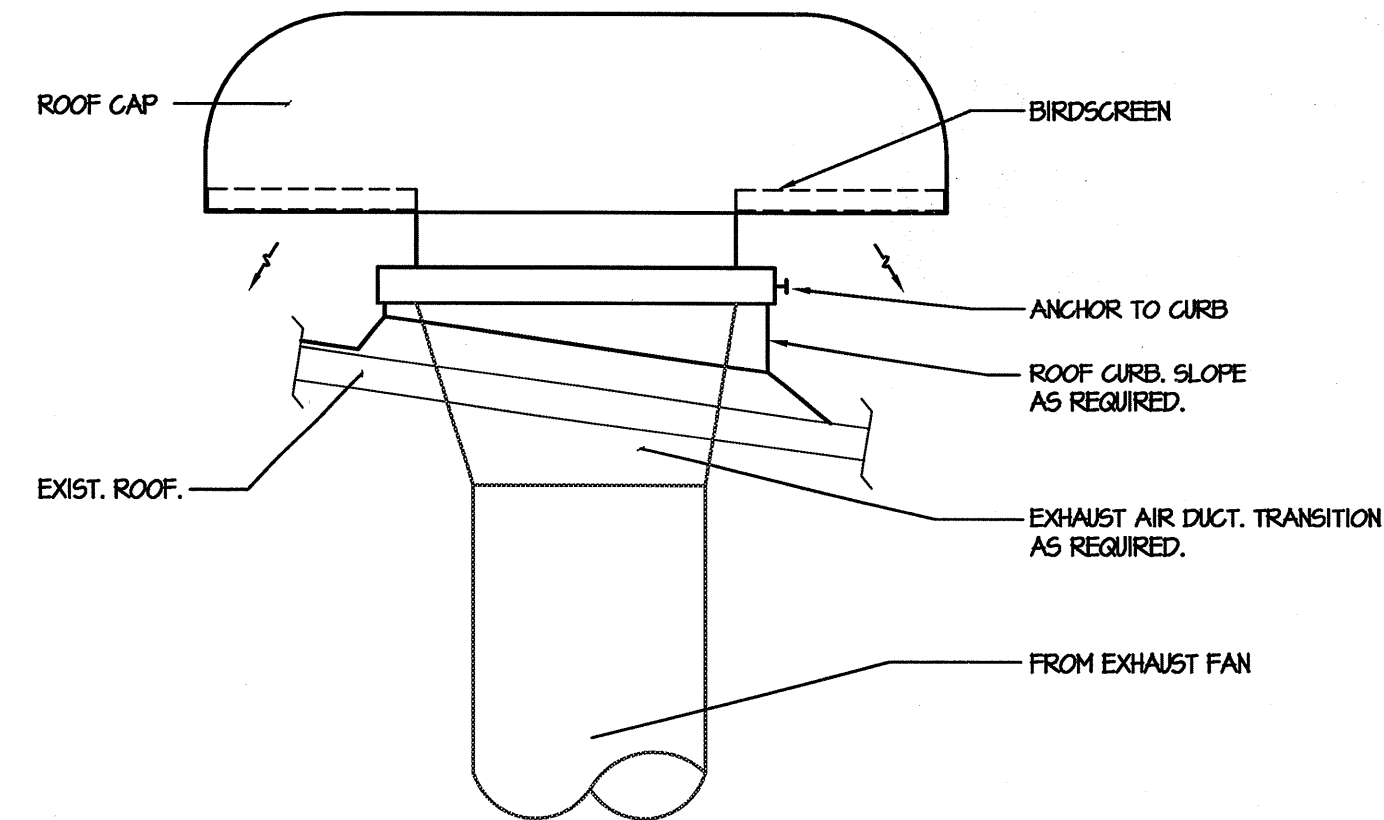


SIDE VIEW

END VIEW

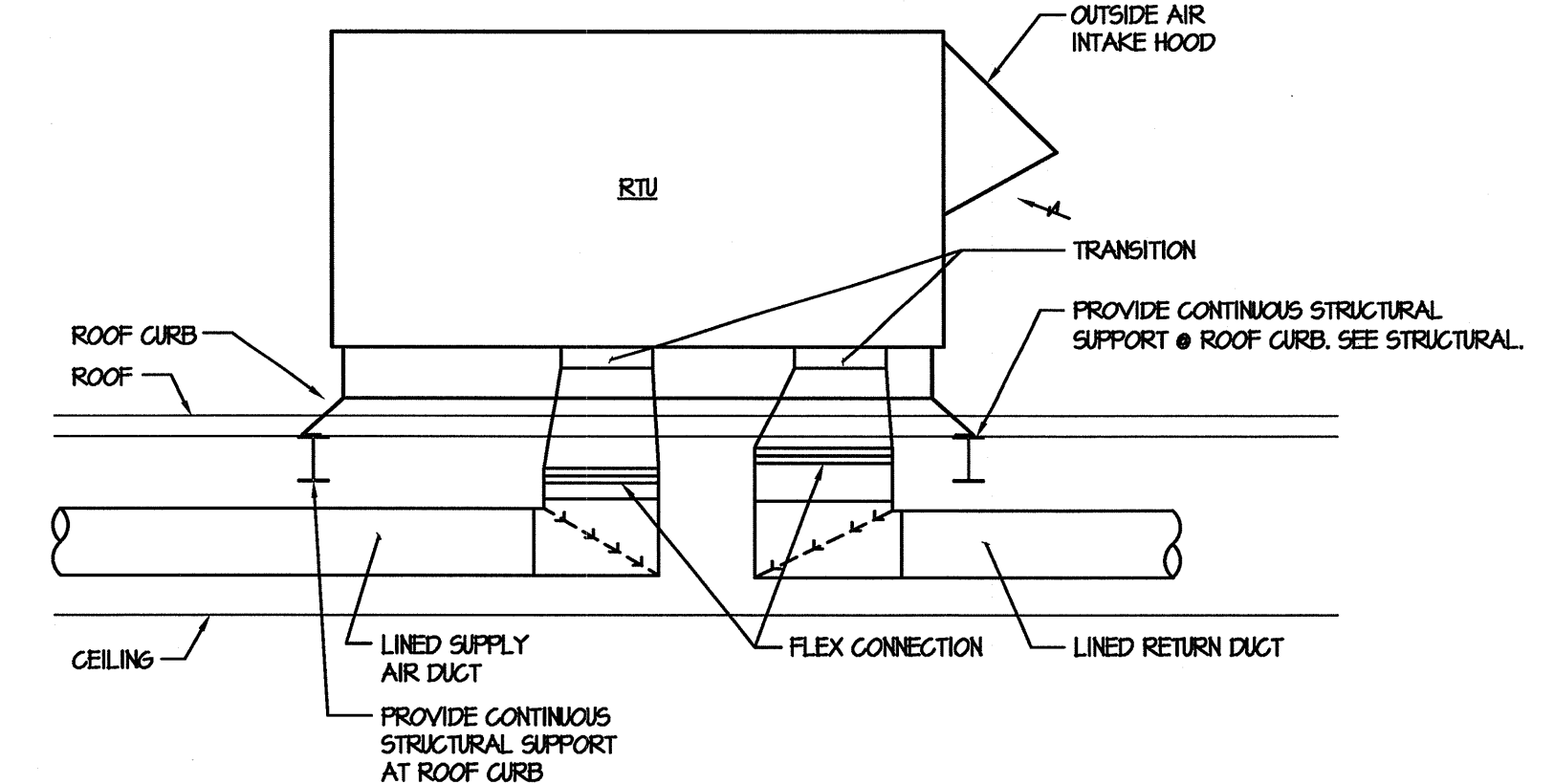
NOTE:
ROOF PENETRATION TO COMPLY WITH ROOFING
MANUFACTURER'S RECOMMENDATION.

1 OUTDOOR UNIT SUPPORT
M2.1 NO SCALE



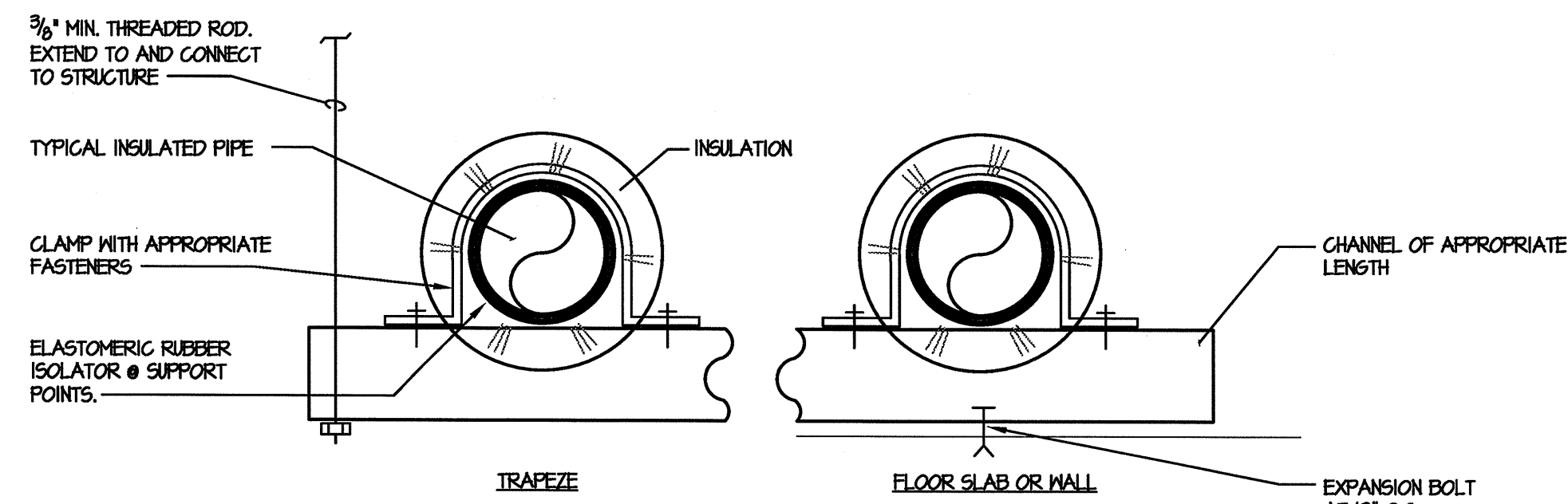
2 ROOF CAP EXHAUST HOOD
M2.1 NO SCALE

NOTE:
ROOF PENETRATION TO COMPLY WITH ROOFING
MANUFACTURER'S RECOMMENDATIONS.



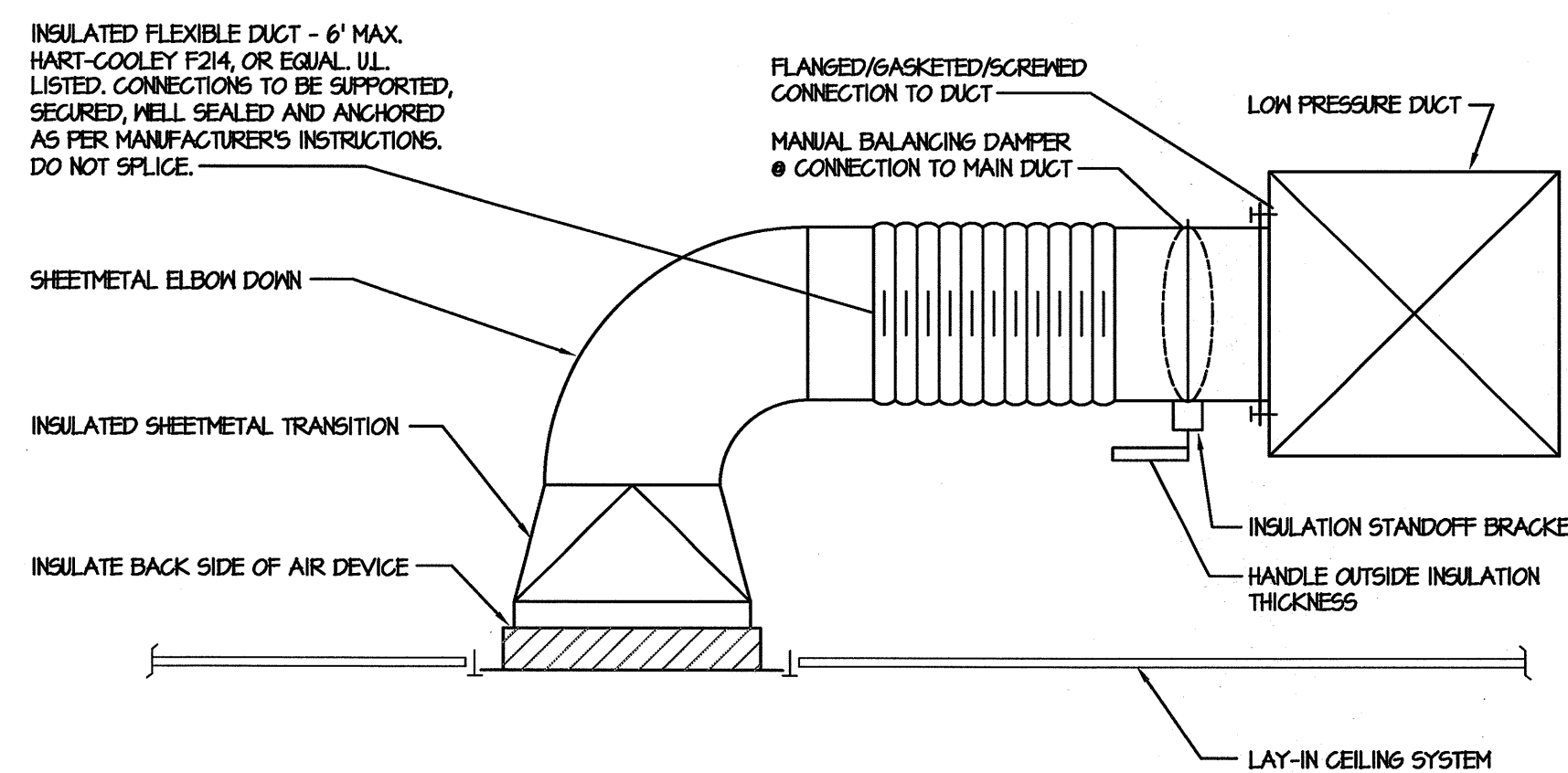
3 RTU ELEVATION
M2.1 NO SCALE

NOTE:
ROOF PENETRATION TO COMPLY WITH ROOFING
MANUFACTURER'S RECOMMENDATIONS.

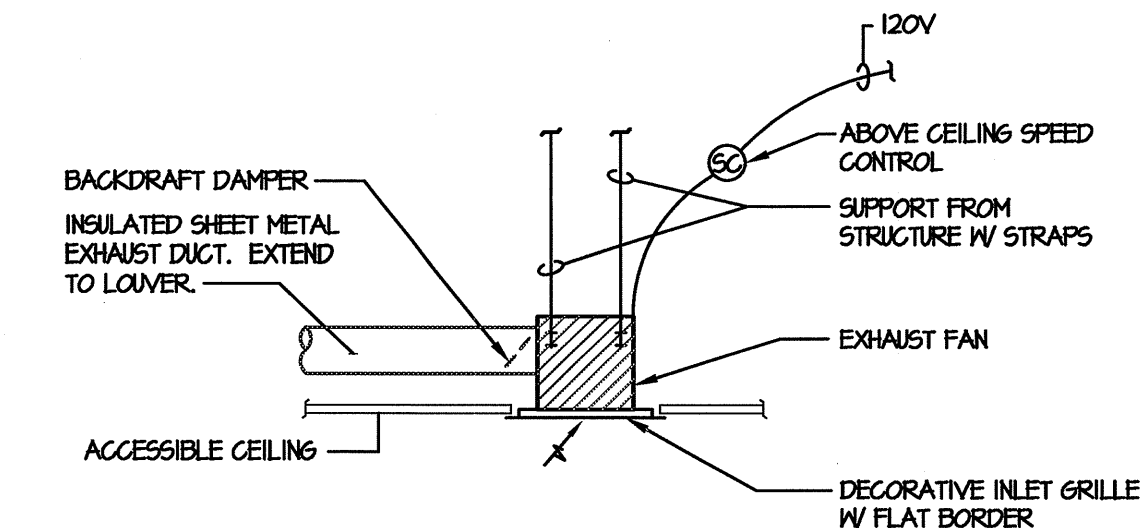


NOTES:
1. USE "MINI-STRUT" OR EQUAL CHANNEL SUPPORT SYSTEM.
2. INDOOR SYSTEM SHALL BE PAINTED STEEL.
OUTDOOR SHALL BE GALVANIZED.

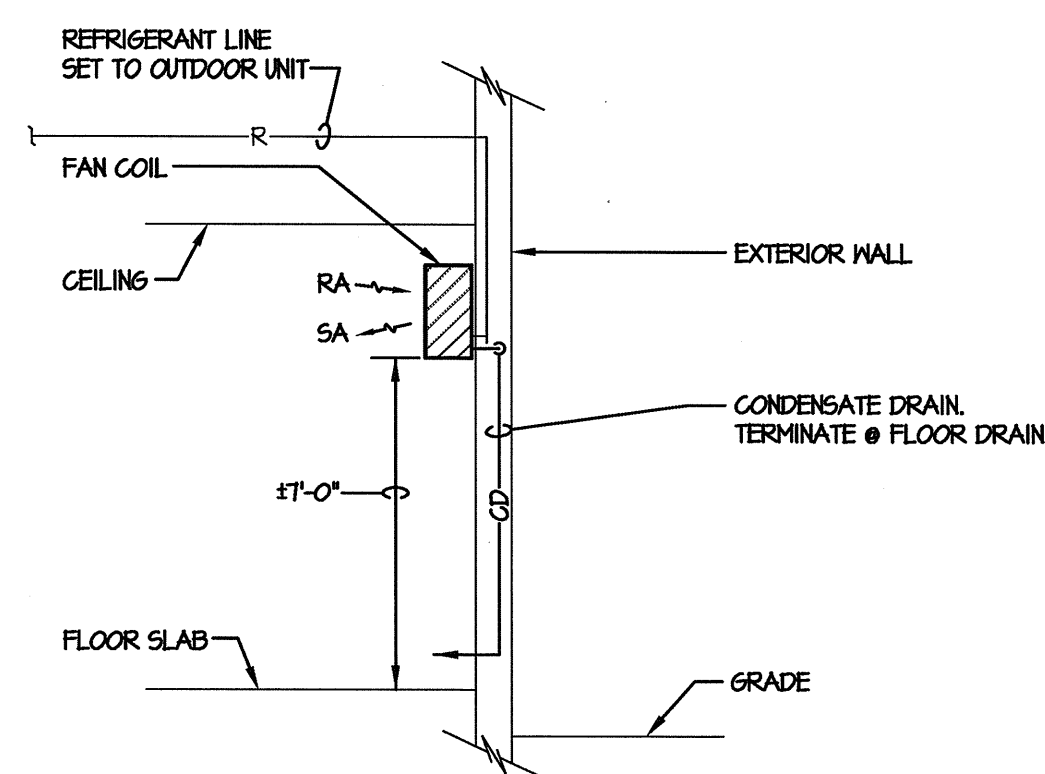
4 PIPE SUPPORT
M2.1 NO SCALE



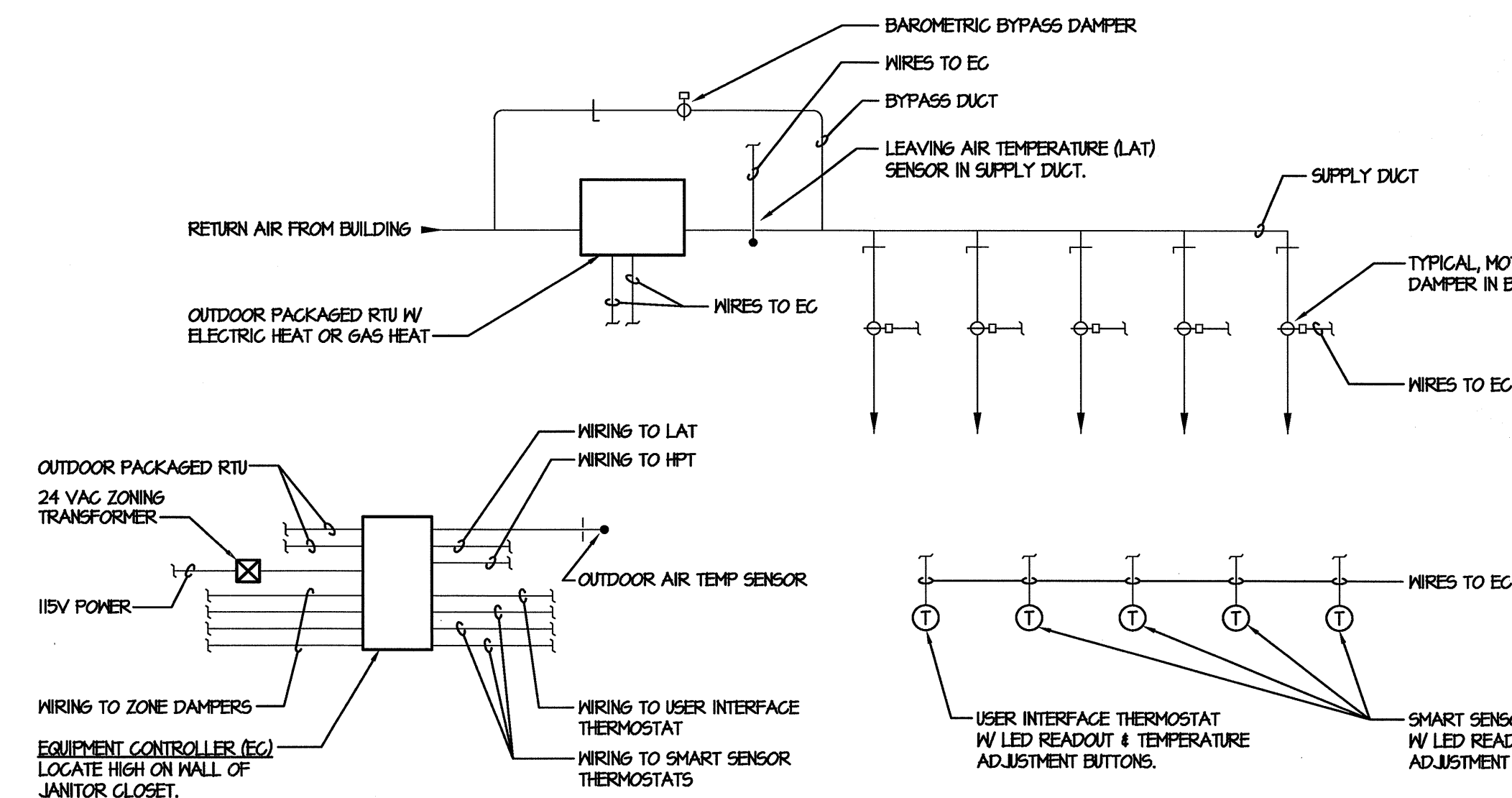
5 CEILING AIR DEVICE
M2.1 NO SCALE



6 CEILING MOUNTED EXHAUST FAN
M2.1 NO SCALE



7 MINI-SPLIT FAN COIL
M2.1 NO SCALE



NOTES:
1. THIS CONTROLS SCHEMATIC DIAGRAM IS PROVIDED TO INTERPRET AND DISPLAY THE SIGNIFICANT COMPONENTS REQUIRED FOR THE INSTALLATION OF THE CARRIER OR EQUAL ZONE/BYPASS DAMPER CONTROL SYSTEM. REFER TO THE CONTROL SYSTEM MANUFACTURERS PRINTED INSTALLATION INSTRUCTIONS AND REFER TO SECTIONS 230431 AND 230400 OF THE PROJECT MANUAL FOR ALL REQUIREMENTS.
2. PROVIDE ALL REQUIRED START UP, PROGRAMMING AND TROUBLE SHOOTING TO THE ARCHITECTS AND OWNERS SATISFACTION.
3. ALL WIRING TO BE CONTINUOUS W/O SPLICES.

8 ZONE/BYPASS DAMPER CONTROLS SCHEMATIC - ROOFTOP UNIT
M2.1 NO SCALE

ROARK PERKINS PERRY YELVINGTON
ARCHITECTURE • INTERIOR DESIGN
713 W. SECOND STREET • LITTLE ROCK, AR 72001-2887
(501) 872-0272

Dental Clinic & Shell Building for
Dr. Clint Fuks
Highway 5 Bryant, Arkansas

CERTIFICATE OF AUTHORITY
MPE CONSULTING ENGINEERS, INC.
No. 558
ARKANSAS ENGINEER
STATE OF ARKANSAS
REGISTERED PROFESSIONAL ENGINEER
No. 5030
DOUGLAS F. BOWEN
10-17-16

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HVAC DETAILS



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| 10-13-2016 | 1549 |
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MPE CONSULTING ENGINEERS, INCORPORATED
SHACKLEFORD PLAZA SUITE 200, LITTLE ROCK, ARKANSAS 72211
(501) 221-0101, TELEPHONE (501) 221-0353, FAX

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MINI-SPLIT SYSTEM DUCTLESS HEAT PUMP

| MARK | REFERENCE PRODUCT | INDOOR INLET dBA | FAN COIL | | OUTDOOR UNIT | | COOLING SEER | OSA CFM | CLG. CAP.-MBH | | COMP. DATA | | CONDENSER UNIT | | INDOOR FAN COIL | | | | | AUX. HEATER | | FAN COIL | | | REMARKS | | | |
|------|-------------------|------------------|----------|--------|--------------|--------|--------------|---------|---------------|------|------------|---------|----------------|--------|-----------------|------|-----|-----|-----|-------------|---|----------|-------|---|---------|-------|-----|-----------------------|
| | | | MODEL | WEIGHT | MODEL | WEIGHT | | | TOT. | SEN. | RLA | VOLTS | φ | M.C.A. | MOCP | WATT | CFM | ESP | RPM | VOLTS | φ | KVA | VOLTS | φ | | VOLTS | MCA | MOCP |
| MS-A | LENNOX | 50 | MHN024 | 50# | MLA024 | 150# | 20 | 0 | 24 | 18 | 14 | 230/208 | 1 | 20 | 30 | 100 | 560 | - | - | - | 1 | 0 | 0 | 0 | - | - | - | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ |

- ① LOW AMBIENT CONTROL TO 0°F. PROVIDE MIND BAFFLE.
- ② CRANKCASE HEATER
- ③ CONDENSATE PUMP WITH INTEGRAL FAIL SAFE SENSOR.
- ④ START CAPACITOR KIT.
- ⑤ AIR FILTER
- ⑥ PROVIDE ONE POWER CIRCUIT TOTAL FOR INDOOR & OUTDOOR UNIT. ROUTE POWER CIRCUIT BETWEEN INDOOR & OUTDOOR UNITS.
- ⑦ R-410A REFRIGERANT
- ⑧ CYCLE PROTECTOR
- ⑨ LIQUID LINE FILTER DRYER
- ⑩ PROVIDE ELECTRONIC CONTROLS WALL THERMOSTAT
- ⑪ LOW VOLTAGE TRANSFORMER
- ⑫ INDOOR UNIT TO HAVE WHITE DECORATIVE FINISH
- ⑬ DC INVERTOR CONTROL W/ VARIABLE FREQUENCY ROTARY COMPRESSOR.

ROOFTOP HEAT PUMP UNITS COOLING SELECTED AT 105 DEGREE F. AMBIENT

| DESIGNATION | LENNOX REFERENCE PRODUCT | ARI SOUND | SUPPLY FAN | | | | COOLING COIL | | | | HEAT PUMP HEATING | | MINIMUM OUTSIDE AIR CFM | ELECTRICAL DATA | | | | | | COOLING SEER | APPROX HEIGHT (ft) | REMARKS |
|-------------|--------------------------|-----------|------------|--------|------|-----|--------------|--------------|--------|--------|-------------------|---------|-------------------------|-----------------|-------|-----------|-----------|-----|------|--------------|--------------------|--------------------------------|
| | | | CFM | E.S.P. | RPM | HP | TOTAL MBH | SENSIBLE MBH | EAT °F | LAT °F | MEH HIGH TEMP | AMBIENT | | VOLTS | PHASE | COMP. RLA | HEATER KM | MCA | MOCP | | | |
| RTU-CORE | KH036 | 83 db | 1200 | 0.75" | - | 0.5 | 33 | 21 | 80/61 | 59/58 | 35 | 45°F | 75 | 208 | 3 | 4 | 15 | 31 | 40 | 14 | 800 | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ |
| RTU | KH040 | 83 db | 1600 | 0.75" | - | 0.5 | 46 | 35 | 80/61 | 60/59 | 41 | 45°F | 100 | 208 | 3 | 11 | 15 | 54 | 60 | 14 | 1000 | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ NOT USED |
| RTU-EAST | KH036 | 83 db | 1200 | 0.75" | - | 0.5 | 33 | 21 | 80/61 | 59/58 | 35 | 45°F | 75 | 208 | 3 | 4 | 15 | 31 | 40 | 14 | 800 | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ |
| RTU-NORTH | KH024 | 83 db | 800 | 0.75" | - | 0.3 | 21 | 11 | 80/61 | 60/59 | 24 | 45°F | 60 | 208 | 1 | 10 | 15 | 50 | 50 | 14 | 800 | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ |
| RTU-SOUTH | KH060 | 83 db | 1400 | 0.75" | 1160 | 1.0 | 56 | 42 | 80/61 | 60/59 | 56 | 45°F | 125 | 208 | 3 | 14 | 15 | 66 | 70 | 14 | 1000 | ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ |

- ① MULTI-SPEED DIRECT DRIVE.
- ② SLOPED ROOF CURB APPROX. 14" TALL.
- ③ HINGED/LATCHED ACCESS PANELS
- ④ SHORT CYCLE PROTECTION
- ⑤ HAIL GUARDS
- ⑥ R-10A REFRIGERANT
- ⑦ 2" AIR FILTERS
- ⑧ 0 TO 25% OPEN THRO POSITION OSA DAMPER.
- ⑨ 0 DEGREE F LOW AMBIENT
- ⑩ LENNOX COMMERCIAL 24/7 ELECTRONIC TOUCH SCREEN PROGRAMMABLE WALL THERMOSTAT.
- ⑪ ZONE DAMPER & BYPASS DAMPER TEMPERATURE CONTROL SYSTEM.

AIR DISTRIBUTION DEVICES

| DESIGNATION | REFERENCE PRODUCT | TYPE | MAX AIR FLOW CFM | STATIC PRESS. IN/10ft2 | NECK SIZE INCHES | PANEL SIZE INCHES | MAX NOISE CRITERIA | FINISH | REMARKS |
|-------------|--------------------|------------------|------------------|------------------------|------------------|-------------------|--------------------|-----------|--|
| | | | | | | | | | |
| D-1 | TITUS MODEL TDC | LOWER | 125 | .03 | 6/6 | 24/24 | 20 | OFF-WHITE | STEEL, OBD, BORDER FOR LAY-IN CEILING |
| D-2 | TITUS MODEL TDC | LOWER | 350 | .03 | 9/4 | 24/24 | 20 | OFF-WHITE | STEEL, OBD, BORDER FOR LAY-IN CEILING |
| D-3 | TITUS MODEL TDC | LOWER | 600 | .03 | 12/12 | 24/24 | 20 | OFF-WHITE | STEEL, OBD, BORDER FOR LAY-IN CEILING |
| D-4 | TITUS MODEL TDC | LOWER | 125 | .03 | 6/6 | 12/12 | 20 | OFF-WHITE | STEEL, OBD, FLAT BORDER |
| D-5 | TITUS MODEL 300 | DOUBLE DEFLECTOR | 150 | .03 | 6/6 | 8/8 | 20 | OFF-WHITE | STEEL, OBD, FLAT BORDER |
| R-1 | TITUS MODEL 350ZRL | LOWER | 2000 | .03 | 22/22 | 24/24 | 20 | OFF-WHITE | STEEL, BORDER FOR LAY-IN CEILING, 3/4" BLADES, 0° DEFLECTION |
| R-2 | TITUS MODEL TDC | LOWER | 300 | .03 | 9/4 | 24/24 | 20 | OFF-WHITE | STEEL, OBD, BORDER FOR LAY-IN CEILING |
| R-3 | TITUS MODEL TDC | LOWER | 500 | .03 | 12/12 | 24/24 | 20 | OFF-WHITE | STEEL, OBD, BORDER FOR LAY-IN CEILING |
| R-4 | TITUS MODEL 350ZRL | HORIZ LOWER | 300 | .03 | 8/8 | 10/10 | 20 | OFF-WHITE | STEEL, OBD, FLAT BORDER |
| R-5 | TITUS MODEL 350ZRL | HORIZ LOWER | 150 | .03 | 6/6 | 8/8 | 20 | OFF-WHITE | STEEL, OBD, FLAT BORDER |
| R-6 | TITUS MODEL TDC | LOWER | 125 | .03 | 6/6 | 12/12 | 20 | OFF-WHITE | STEEL, OBD, FLAT BORDER |
| TG-1 | TITUS MODEL T100 | DOOR GRILLE | 200 | .01 | 14/14 | 16/16 | 10 | OFF-WHITE | STEEL, FLAT BORDER, AUX. FRAME |

REFER TO ARCHITECTURAL PLANS FOR CEILING TYPES AND MOUNTING REQUIRED.

FANS

| DESIGNATION | REFERENCE PRODUCT | LOCATION | SERVES | HEIGHT (ft) | TYPE | DRIVE | AIR FLOW RATE CFM | EXT. STAT. PRESSURE IN/10ft2 | ROTATION REV./MIN | MOTOR POWER | | ELECTRICAL DATA | | SONES | REMARKS |
|-------------|-------------------|----------|---------------------------------------|-------------|-------|--------|-------------------|------------------------------|-------------------|-------------|------|-----------------|-------|-------|-------------|
| | | | | | | | | | | BHP | WATT | VOLTS | PHASE | | |
| EF-A | COOK EC-140 | CEILING | JANITOR, TOILETS, STERILIZATION & LAB | 35 | CENT. | DIRECT | 100 | 0.5" | 1100 | - | 100 | 120 | 1 | 3 | ① ② ③ ④ ⑤ ⑥ |
| EF-B | COOK EC-120 | CEILING | N2O CLOSET | 35 | CENT. | DIRECT | 25 | 0.25" | - | - | 25 | 120 | 1 | 2 | ① ② ③ ④ ⑤ ⑥ |

- ① WHITE DECORATIVE CEILING GRILLE
- ② BACKDRAFT DAMPER
- ③ SPEED CONTROL THIS SPEED CONTROL TO BE ADJUSTED BY AIR BALANCE CONTRACTOR.
- ④ 6IK HANGER ISOLATOR KIT
- ⑤ DISCONNECT
- ⑥ THERMAL OVERLOAD PROTECTION

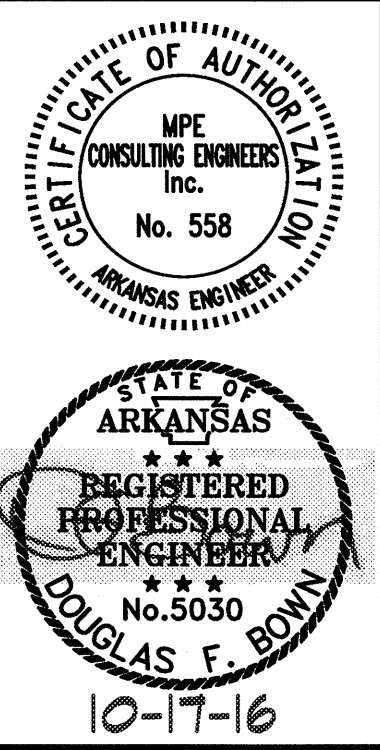
ROOF CAP

| DESIGNATION | COOK REFERENCE PRODUCT | APPROX. INLET SIZE (IN) | CFM | APPROX. DIAMETER (IN) | APPROX. HEIGHT (IN) | APPROX. MT. (ft) | REMARKS |
|-------------|------------------------|-------------------------|-----|-----------------------|---------------------|------------------|---------|
| RC-A | PR12 | 12" | 600 | 28 | 12 | 40 | ① ② ③ ④ |
| RC-B | PR8 | 8" | 200 | 18 | 10 | 20 | ① ② ③ ④ |

- ① ALL ALUMINUM CONSTRUCTION, ANTI-BACKDRAFT FLANGE, CURB MOUNT
- ② BIRD SCREEN
- ③ INSULATED ROOF CURB
- ④ EXHAUST

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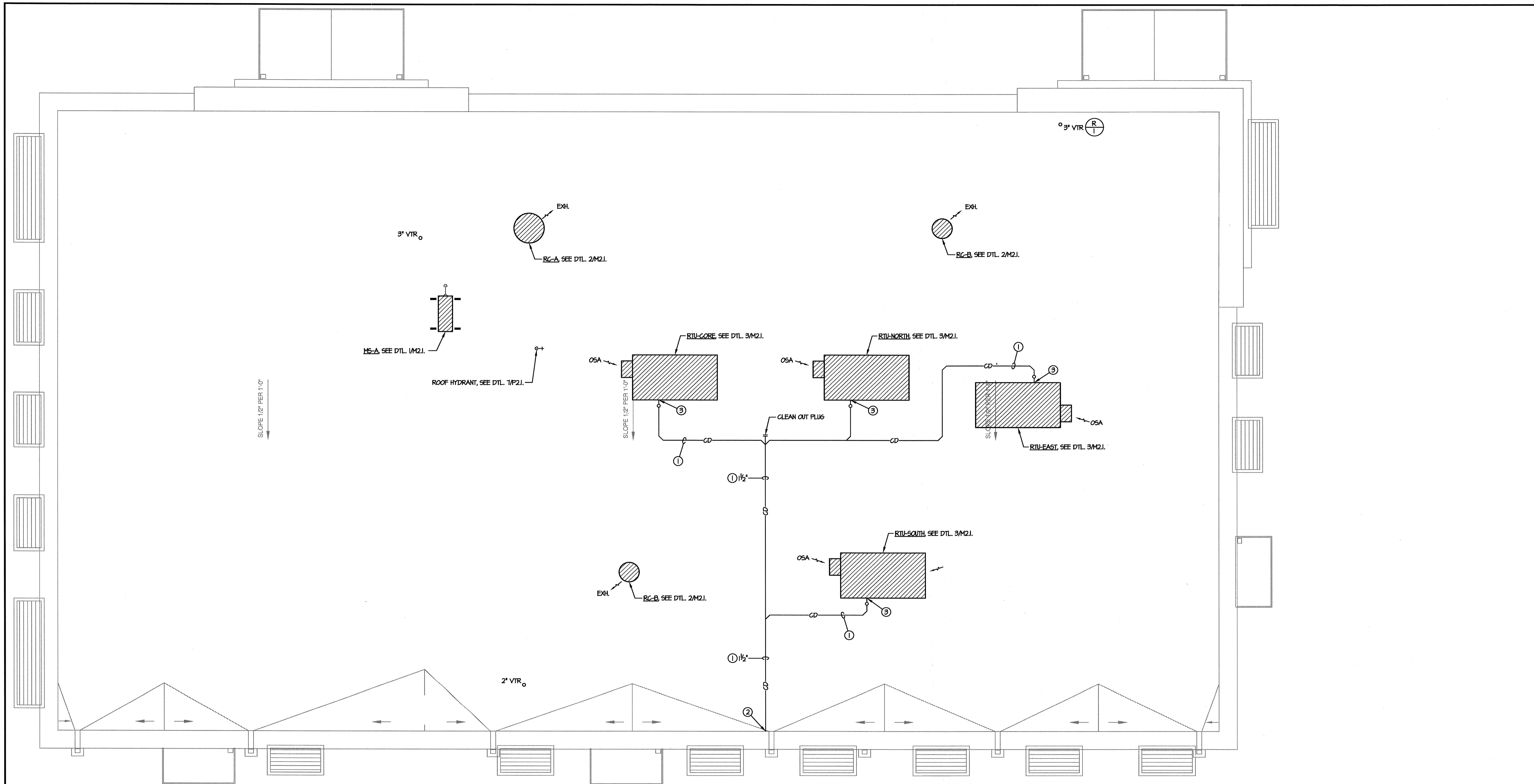
HVAC SCHEDULES



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 (501) 221-8101, TELEPHONE (501) 221-8353, FAX

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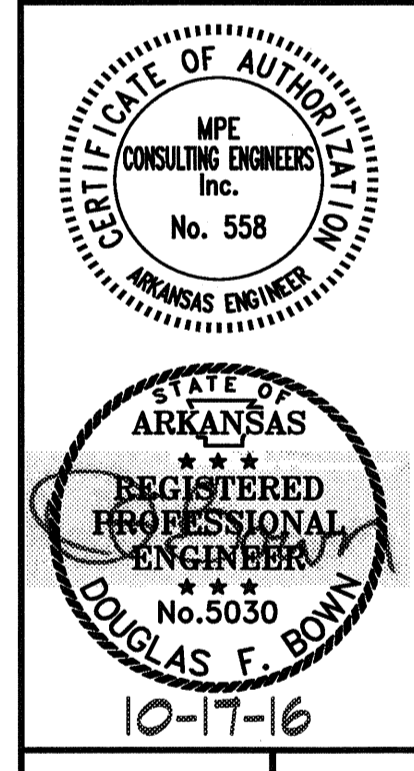


MECHANICAL ROOF PLAN
 1/4" = 1'-0"
 NOTE: ROOF PENETRATIONS TO COMPLY WITH ROOF MANUFACTURER'S REQUIREMENTS.

- KEYED NOTES**
- ① SUPPORT PIPE OFF ROOF. SEE DETAIL 5/P21.
 - ② TERMINATE DRAINS @ SCUPPER.
 - ③ MAKE DRAIN CONNECTION AS PER MANUFACTURER'S INSTRUCTIONS, TYPICAL.
 - ④ FREEZE PROOF HYDRANT. SEE DETAIL 1/P21.

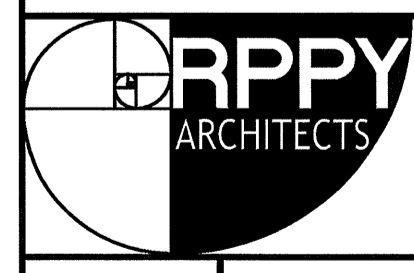
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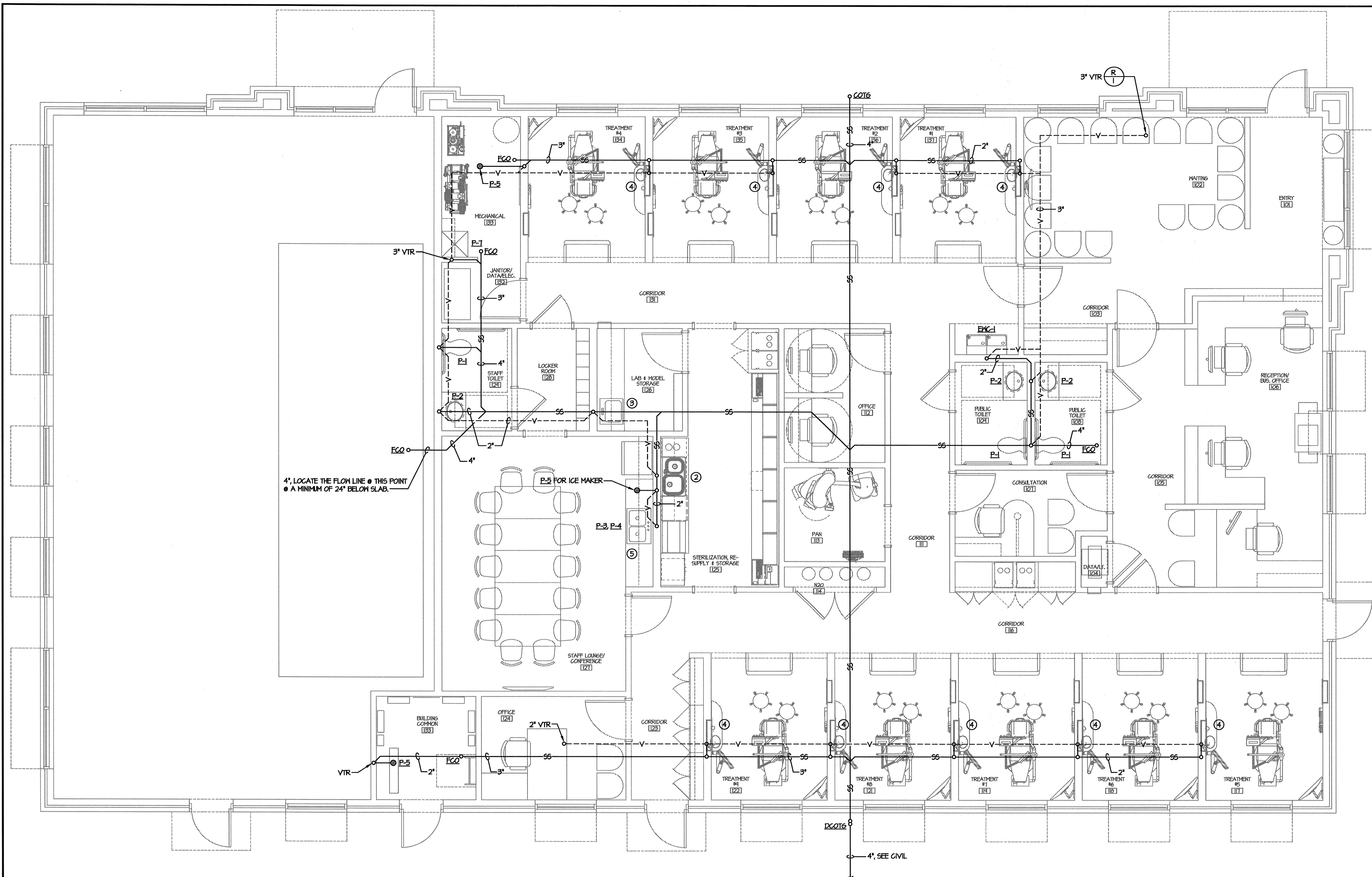
MECHANICAL ROOF PLAN



| | |
|------------|---------|
| 10-17-2016 | 1549 |
| DATE | JOB NO. |
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| SHEET | OF |

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4' LOCATE THE FLOW LINE @ THIS POINT @ A MINIMUM OF 24\"/>

PLUMBING PLAN
1/4\"/>

CONTRACTOR TO PROVIDE PIPE CONNECTIONS TO ALL DENTAL OUTLETS, DEVICES, SINKS, DRAINS, VACUUM, MEDICAL GAS VENTS, EQUIPMENT, ETC. AS REQUIRED BY THE DENTAL EQUIPMENT DRAWINGS. COMPLY W/ THE INSTALLATION INSTRUCTIONS FURNISHED W/ THE DENTAL EQUIPMENT. PROVIDE PIPES, SHUT OFFS, REDUCERS, FITTINGS, TRANSITIONS, TRIM, CONNECTIONS, ETC. TO PROVIDE COMPLETE & OPERATING SYSTEMS. CONTACT THE DENTAL EQUIPMENT CONTRACTOR REGARDING THE EXACT SCOPE OF WORK REQUIRED THROUGHOUT THE BUILDING.

| MINIMUM FIXTURE CONNECTION SIZES (INCH) | | | | |
|---|------|------|--------|--------|
| TYPE | CM | HM | VENT | SEWER |
| WATER CLOSET TANK TYPE | 1/2" | - | 2" | 3" |
| LAVATORY | 1/2" | 1/2" | 1 1/4" | 1 1/4" |
| SINK | 1/2" | 1/2" | 1 1/4" | 1 1/2" |
| JANITOR SINK | 1/2" | 1/2" | 2" | 3" |
| FLOOR DRAIN | - | - | 1 1/2" | 2" |
| HOSE BIBB & HYDRANT | 3/4" | - | - | - |
| ENH | 1/2" | - | 1 1/4" | 1 1/4" |
| KITCHEN SINK W/ DISPOSER & DISHWASHER | 1/2" | 1/2" | 1 1/2" | 2" |

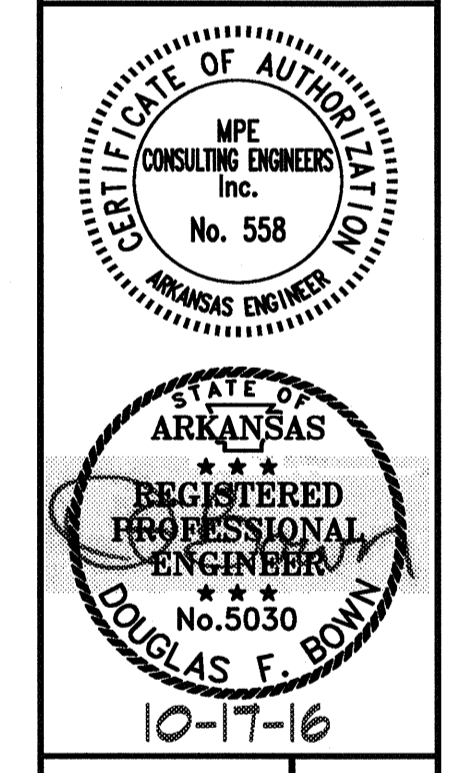
- LEGEND**
- SS — SANITARY SEWER
 - SD — STORM DRAIN
 - 4 — REDUCER/INCREASER
 - V — SANITARY VENT
 - G — GUNCE PRESSURE NATURAL GAS
 - MFG — FOUND PRESSURE UTILITY NATURAL GAS
 - (R) — PRESSURE REGULATOR
 - — — — — DOMESTIC COLD WATER
 - — — — — DOMESTIC HOT WATER
 - — — — — HOT WATER RECIRCULATION
 - CA — MEDICAL COMPRESSED AIR
 - O2 — MEDICAL OXYGEN
 - N2O — MEDICAL NITROUS OXIDE
 - VAC — MEDICAL VACUUM
 - — — — — BALL VALVE
 - — — — — RPZ BACKFLOW PREVENTOR
 - — — — — NYE STRAINER
 - — — — — CHECK VALVE
 - DCOTG — DOUBLE CLEANOUT TO GRADE
 - COG — CLEANOUT TO GRADE
 - o FCG — FLOOR CLEANOUT
 - ⊙ — KEYED NOTE
 - ⊕ — CONNECT TO EXISTING AT THIS POINT

- NOTES**
1. COMPLY WITH ALL STATE AND CITY CODES.
 2. REFER TO THE PROJECT MANUAL FOR ALL REQUIREMENTS. SEE SECTION 230450 FOR PLUMBING FIXTURE & EQUIPMENT SCHEDULE.
 3. VERIFY EXACT LOCATION OF FLOOR DRAINS AND FIXTURES. COORDINATE WITH THE OTHER TRADES.
 4. VISIT SITE AND VERIFY CONDITIONS BEFORE BIDDING.
 5. BEFORE BEGINNING INSTALLATION, VERIFY UTILITIES LOCATIONS AND INVERTS WITH THE CIVIL ENGINEER.
 6. IF CITY WATER PRESSURE EXCEEDS 75 PSI PRESSURE, PROVIDE A LINE SIZED PRESSURE REGULATOR WITH INLET STRAINER.
 7. PAY ALL FEES AND CHARGES.
 8. WATER PIPES ROUTED IN EXTERIOR WALLS SHALL BE POSITIONED ON THE "HEATED SIDE" OF THE BUILDING INSULATION ROUTE PIPES BELOW CEILING INSULATION.
 9. BELOW SLAB WATER PIPE SHALL BE SOFT DRAIN TYPE 1/2" COPPER WITHOUT FITTINGS. SLEEVE IN ENTIRETY WITH "ARMAFLEX" OR POLYETHYLENE SLEEVE MATERIAL.
 10. CLEAN ALL TRAPS AND PRIME AT THE END OF CONSTRUCTION.
 11. ROD CLEAN ALL STORM DRAIN & SANITARY SEWER DRAINS @ THE END OF CONSTRUCTION.
 12. FLOOR DRAINS/SINKS TO HAVE TRAP GUARD OR TRAP PRIMER.
 13. MAINTAIN 10'-0" MINIMUM CLEARANCE BETWEEN OSA INTAKES AND ALL EXHAUST FANS, FLUES, PLUMBING VENTS, AND OTHER ODOR SOURCES.
 14. INSTALLATION TO BE COORDINATED WITH STRUCTURAL, ELECTRICAL, AND GENERAL CONSTRUCTION.

- KEYED NOTES**
- ① ABOVE CEILING.
 - ② SINK, OWNER FURNISHED, CONTRACTOR INSTALLED. PROVIDE TRAP, DRAIN, SUPPLIES, SHUT-OFFS & ALL TRIM AS REQUIRED FOR A COMPLETE INSTALLATION.
 - ③ SINK, OWNER FURNISHED, CONTRACTOR INSTALLED. PROVIDE PLASTER TRAP, DRAIN, SUPPLIES, SHUT-OFFS & ALL TRIM AS REQUIRED FOR A COMPLETE INSTALLATION.
 - ④ DENTAL COMFORT STATION, OWNER FURNISHED, CONTRACTOR INSTALLED. PROVIDE TRAP, DRAIN, SUPPLIES, SHUT-OFFS & ALL TRIM AS REQUIRED FOR A COMPLETE INSTALLATION.
 - ⑤ PROVIDE A DOMESTIC HOT WATER PIPE, ACCESSIBLE SHUT OFF AND CONNECTION TO RESIDENTIAL DISHWASHER. PROVIDE DISHWASHER DRAIN CONNECTION.

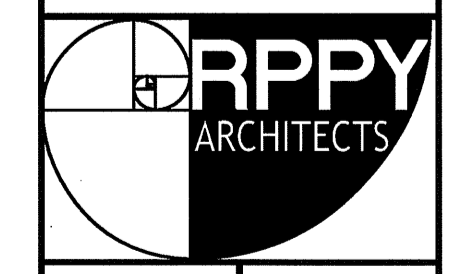
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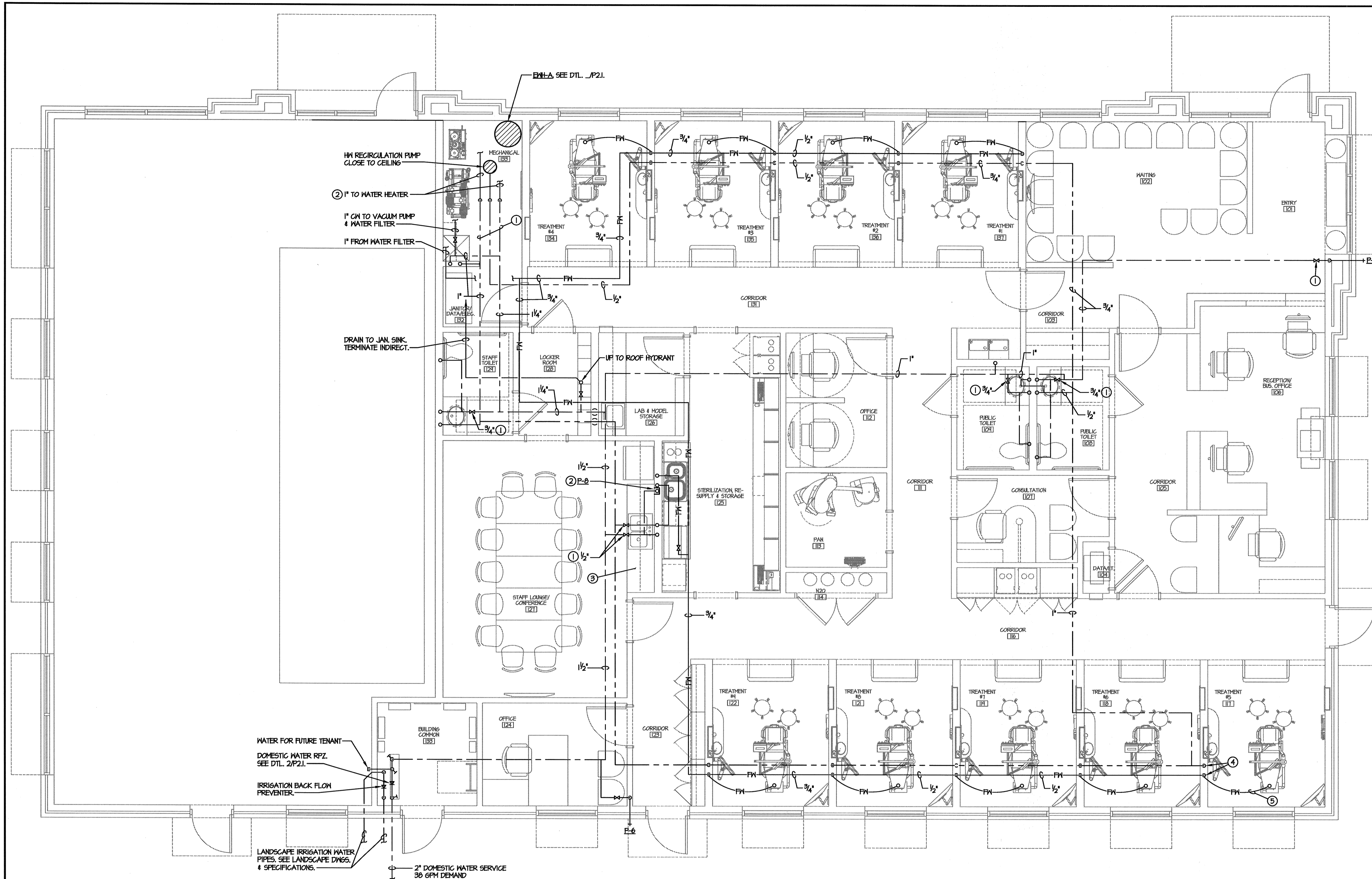
PLUMBING PLAN



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| 10-17-2016 | 1549 |
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MPE CONSULTING ENGINEERS, INCORPORATED
8 SHILOH PLAZA, SUITE 200, LITTLE ROCK, ARKANSAS 72211
(501) 221-8101, TELEPHONE (501) 221-8353, FAX

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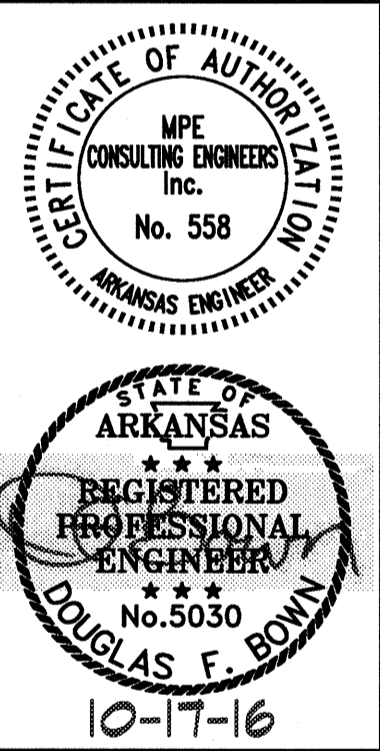


DOMESTIC WATER PLAN
 1/4" = 1'-0"

KEYED NOTES

- ① ABOVE CEILING.
- ② LOCATE IMMEDIATELY BELOW CEILING.
- ③ MAKE DRAIN & HW CONNECTION TO RESIDENTIAL DISH WASHER.
- ④ WATER DOWN TO TREATMENT SINK & CHAIR TYPICAL.
- ⑤ BELOW SLAB, TYPICAL.

WATER FOR FUTURE TENANT
 DOMESTIC WATER RPZ.
 SEE DTL. 2/P21.
 IRRIGATION BACK FLOW
 PREVENTER.
 LANDSCAPE IRRIGATION WATER
 PIPES. SEE LANDSCAPE DWGS.
 & SPECIFICATIONS.
 2" DOMESTIC WATER SERVICE
 30 GPM DEMAND



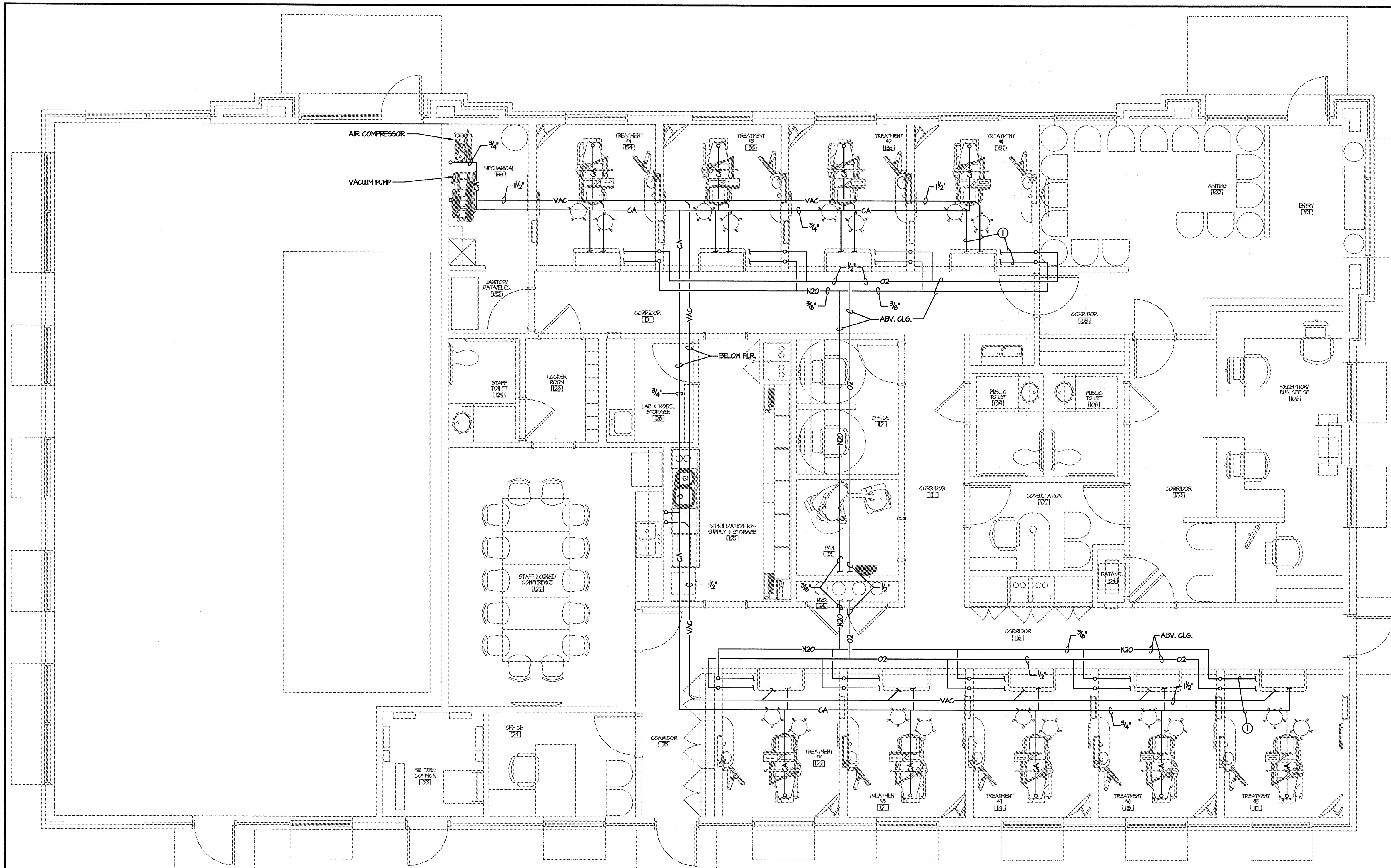
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DOMESTIC WATER PLAN



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MEDICAL GAS & VACUUM PLAN
 1/4" = 1'-0"

KEYED NOTES

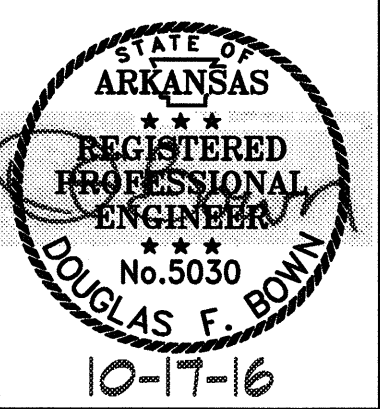
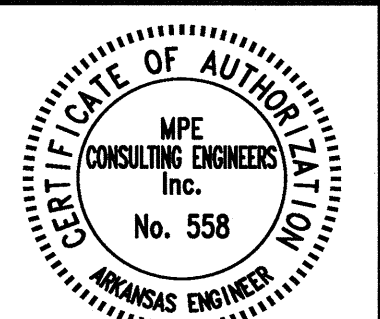
- ① BELOW SLAB TO REAR CABINET. TYPICAL.
- ② THROUGHOUT EQUIPMENT ROOM, PROVIDE VACUUM PUMP, COMPRESSOR AND WATER FILTER CONNECTIONS AS DESCRIBED ON THE DENTAL EQUIPMENT DRAWINGS. ALSO PROVIDE AIR COMPRESSOR FRESH AIR INTAKE PIPE AND VACUUM PIPE EXHAUST PIPE THROUGH EXTERIOR WALLS. PROVIDE TEN FEET MINIMUM SEPARATION BETWEEN AIR COMPRESSOR FRESH AIR INTAKE AND VACUUM PIPE OR OTHER CONTAMINATED SOURCES.

MEDICAL GAS PIPE/TUBING SYSTEM SPECIFICATIONS

PROVIDE A MEDICAL VACUUM, OXYGEN, COMPRESSED AIR AND NITROUS OXIDE PIPING SYSTEM IN FULL COMPLIANCE WITH NFPA 99, HEALTH CARE FACILITIES, SECTION 5.3, LEVEL THREE PIPED GAS AND VACUUM SYSTEMS. ALSO COMPLY WITH ANY LOCAL REQUIREMENTS. WORK SHALL BE COORDINATED WITH AND APPROVED BY THE OWNER AND SHALL BE ACCOMPLISHED BY INDIVIDUALS QUALIFIED UNDER THE REQUIREMENTS OF ASSE 6010, MEDICAL GAS SYSTEMS INSTALLERS PROFESSIONAL QUALIFICATION STANDARDS. ALL RUNS OF BELOW SLAB TUBING SHALL BE KEPT TO A MINIMUM. THE BELOW SLAB TUBES SHALL BE INSTALLED IN ONE OR MORE CONTINUOUS CONDUITS THAT ARE OF SUFFICIENT SIZE TO PERMIT SUBSEQUENT INSTALLATION, REMOVAL, AND REPLACEMENT OF THE GAS AND/OR VACUUM LINES. TUBING WITHIN THE CONDUIT SHALL BE CONTINUOUS WITHOUT JOINTS. COMPLY WITH THE CODE REQUIRED LEVEL 3 PERFORMANCE CRITERIA AND TESTING. ALSO COMPLY WITH THE BENCO DENTAL EQUIPMENT DRAWINGS AND SPECIFICATIONS.

ROARK PERKINS PERRY YELVINGTON
 ARCHITECTURE • INTERIOR DESIGN
 713 W. SECOND STREET • LITTLE ROCK, AR 72201-2887
 (501) 372-0272

Dental Clinic & Shell Building for
Dr. Clint Fuks
 Highway 5 Bryant, Arkansas



| REVISIONS | DATE |
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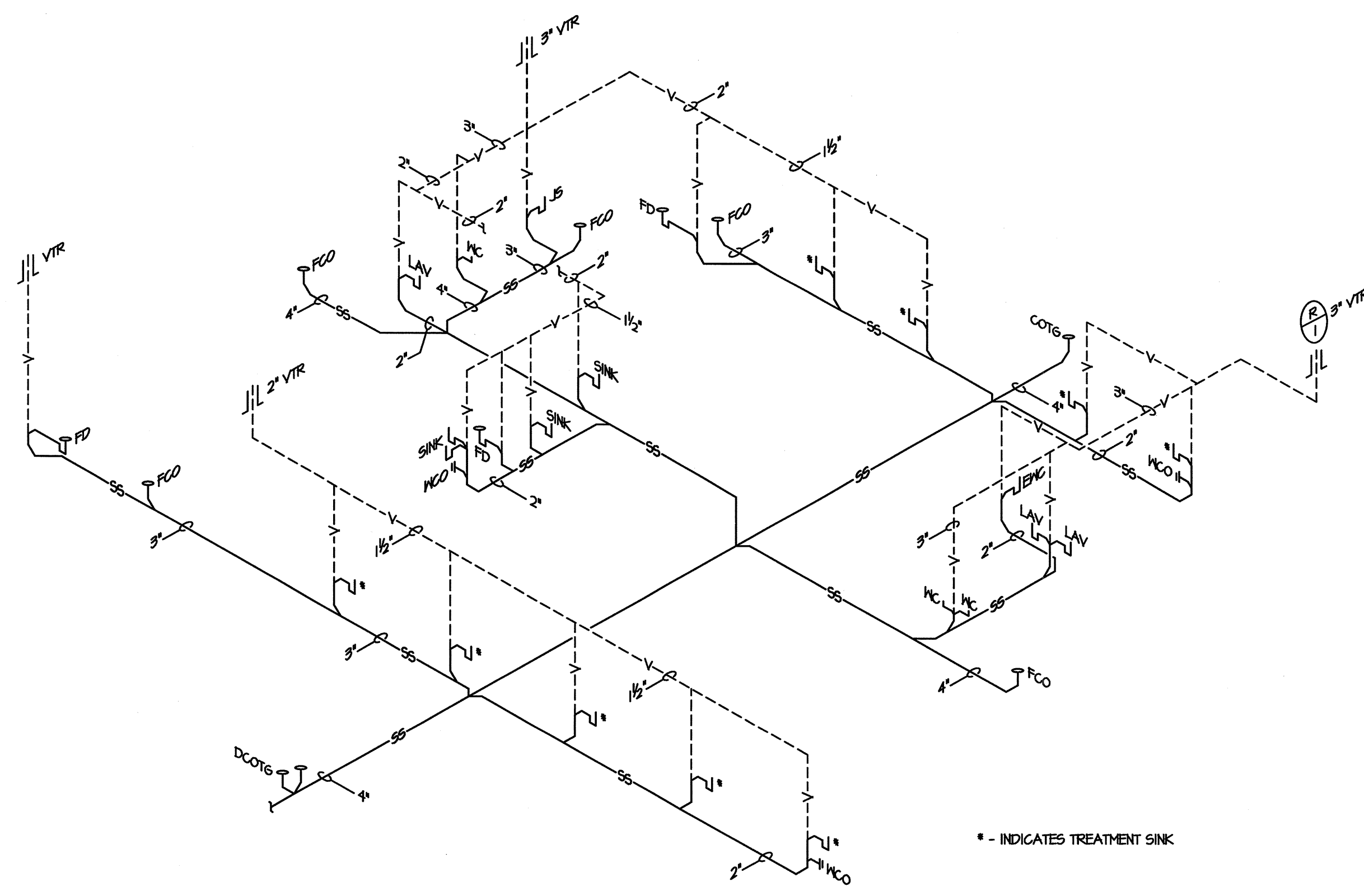
MEDICAL GAS & VACUUM PLAN



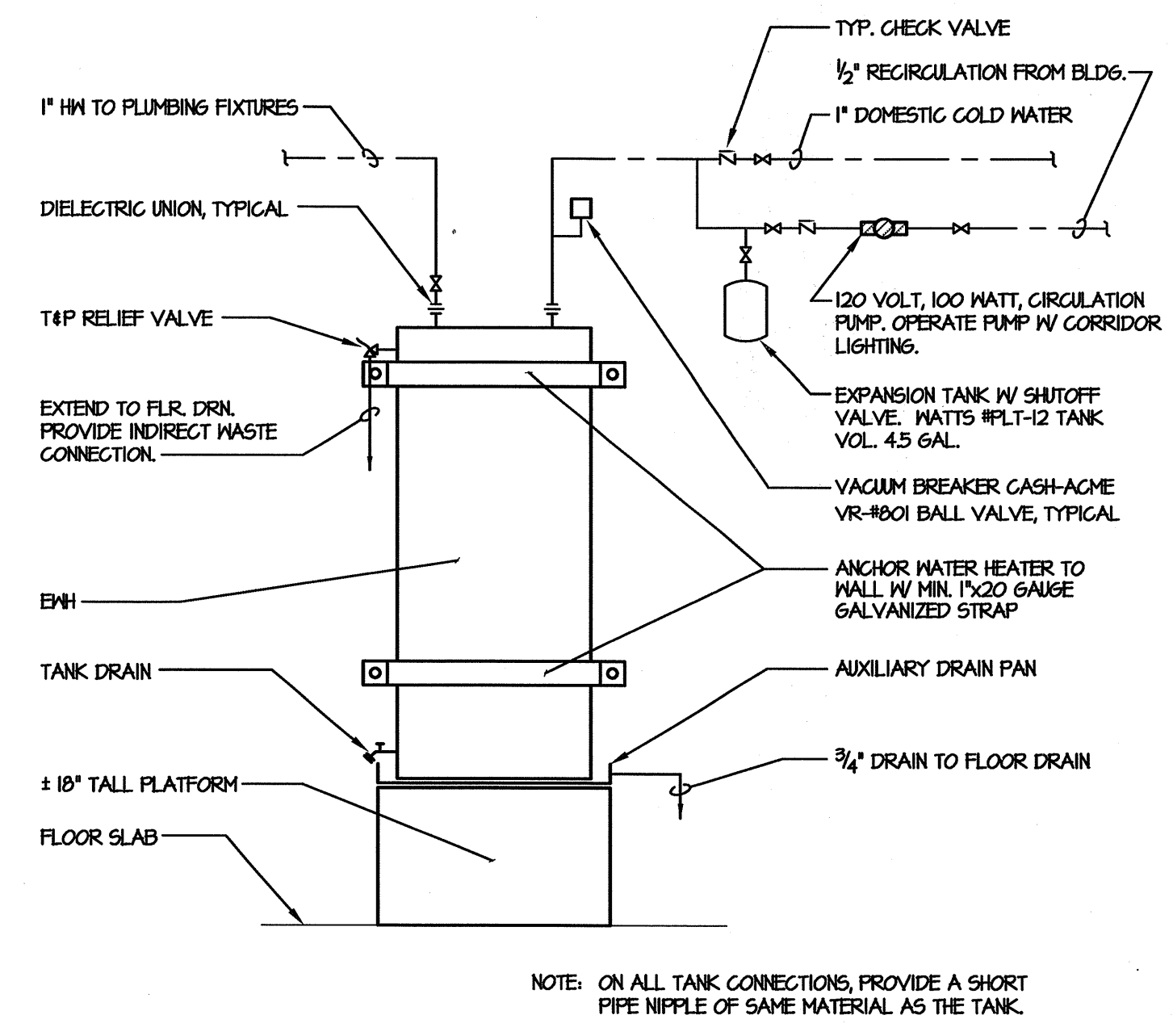
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 8 SHAKLEFORD PLAZA, SUITE 200, LITTLE ROCK, ARKANSAS 72211
 (501) 221-0101, TELEPHONE (501) 221-0353, FAX

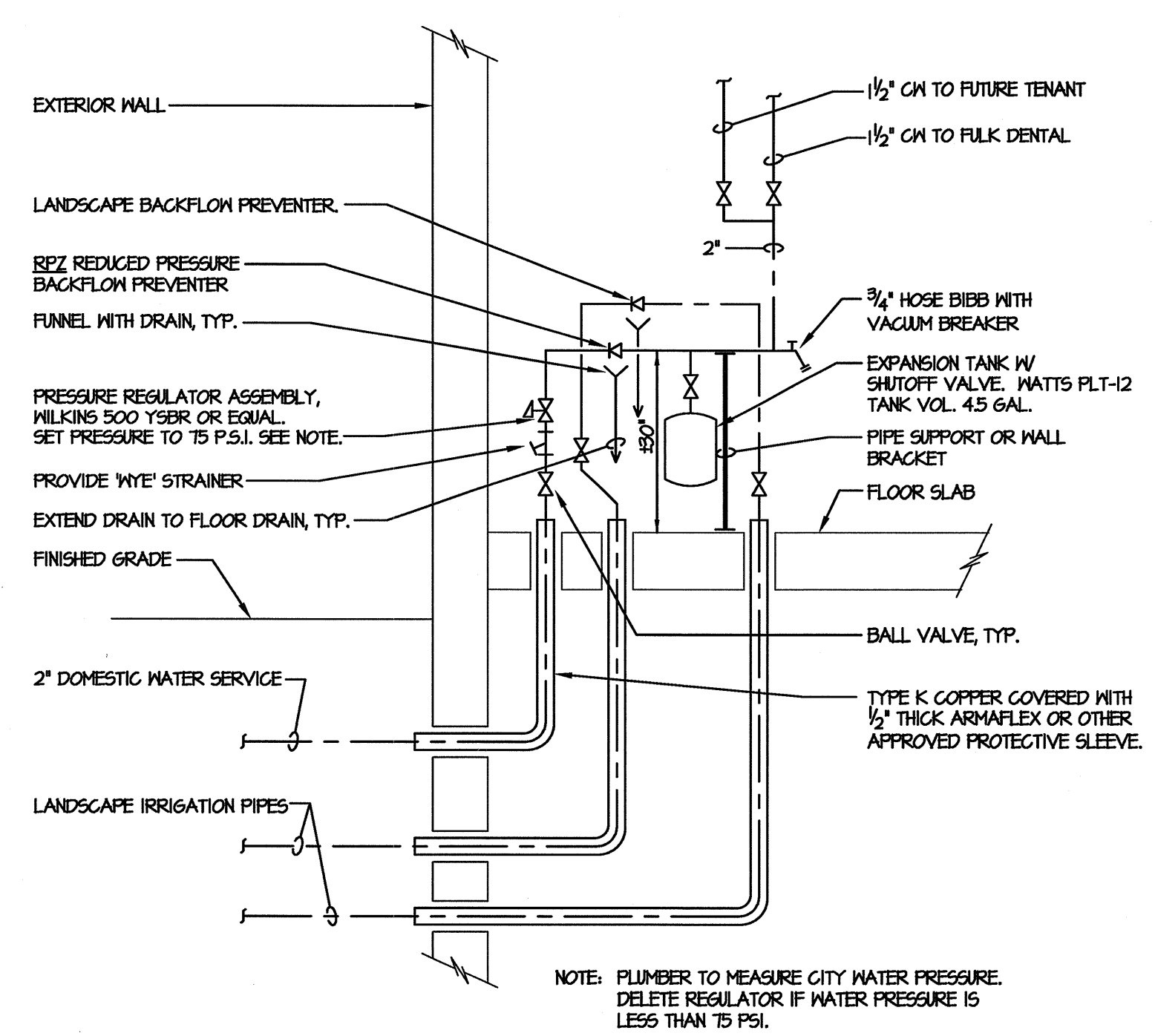
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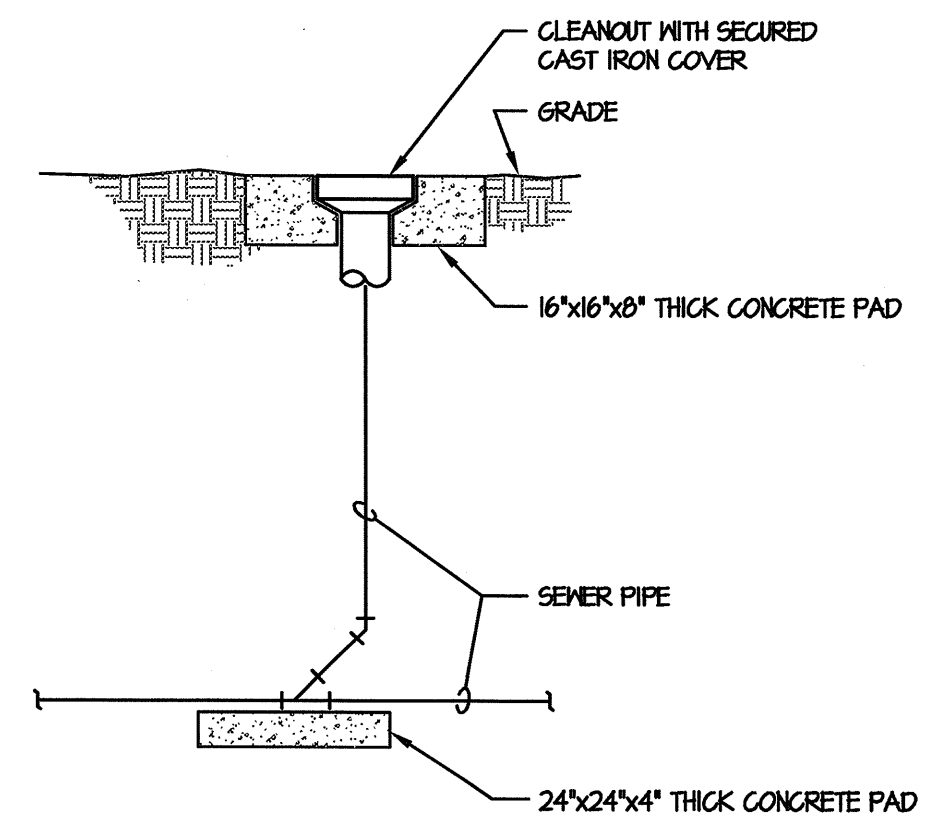
1 WASTE/VENT RISER
NO SCALE



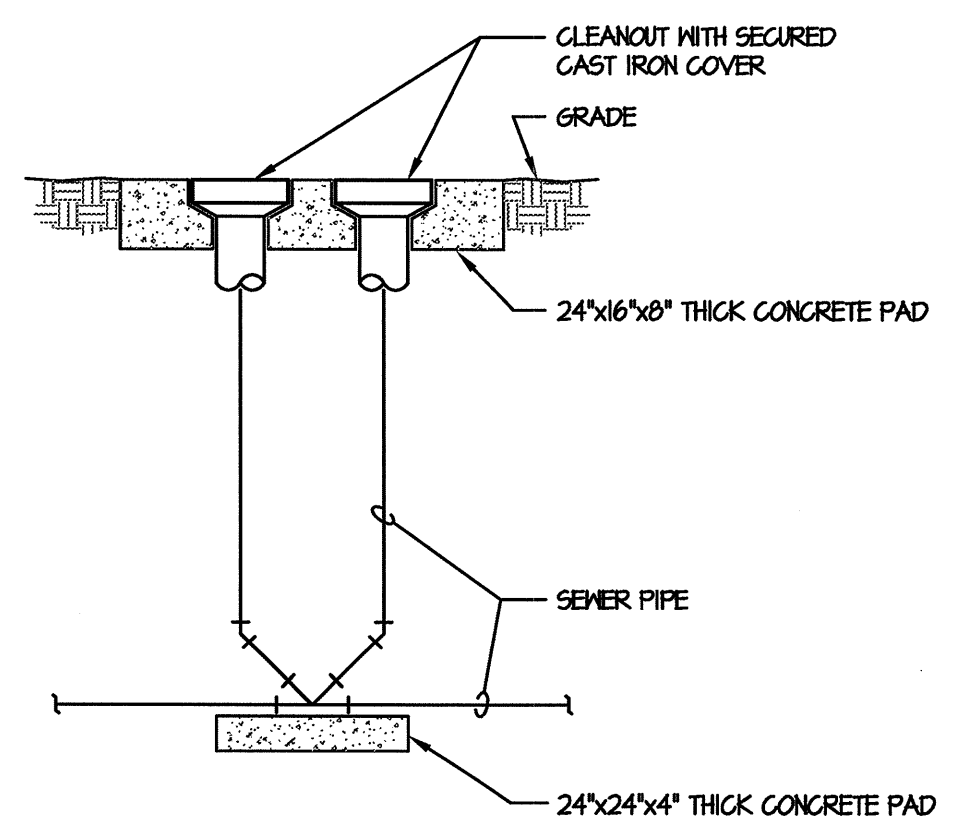
1 ELECTRIC WATER HEATER ON PLATFORM
NO SCALE



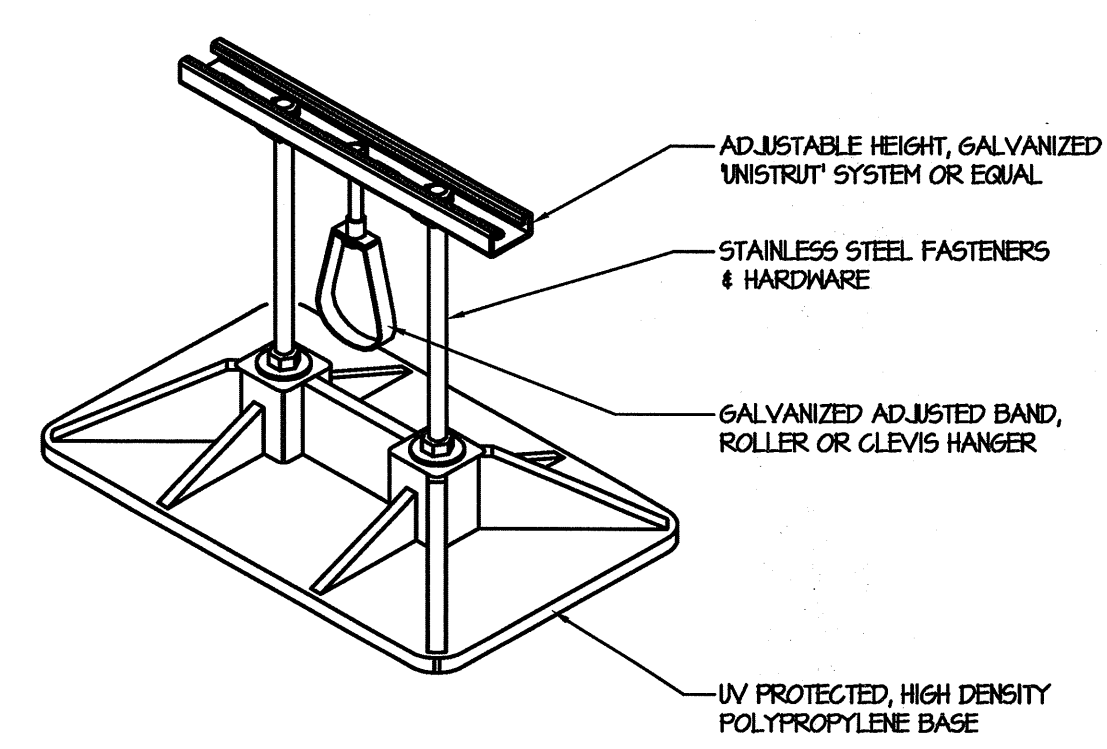
2 DOMESTIC WATER RISERS
NO SCALE



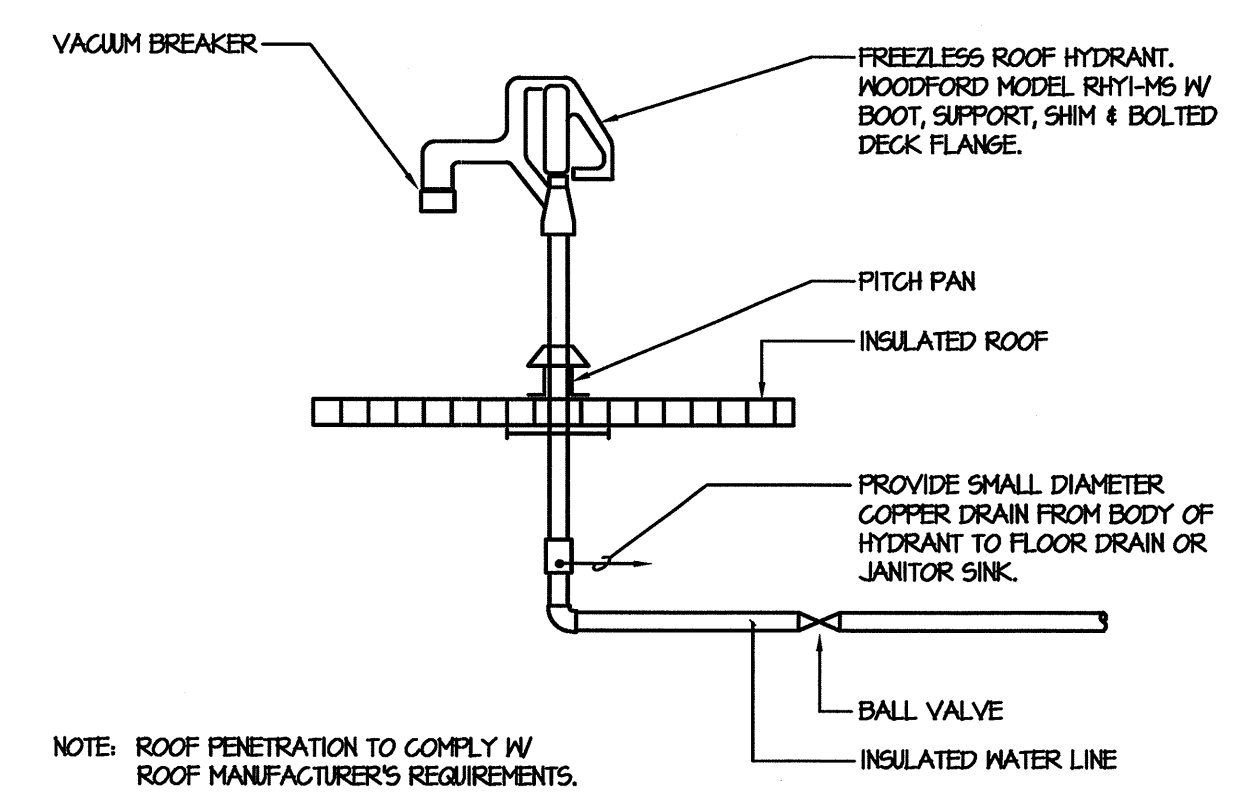
3 CLEANOUT TO GRADE
NO SCALE



4 DOUBLE CLEANOUT TO GRADE
NO SCALE



5 GAS OR CONDENSATE PIPE ROOF SUPPORT
NO SCALE



7 ROOF MOUNTED FREEZE PROOF YARD HYDRANT
NO SCALE

ROARK PERKINS PERRY YELVINGTON
ARCHITECTURE • INTERIOR DESIGN
713 W. SECOND STREET • LITTLE ROCK, AR 72201-2887
601.572.6272
WWW.RPPYARCHITECTS.COM

Dental Clinic & Shell Building for
Dr. Clint Fulks
Highway 5 Bryant, Arkansas

CERTIFICATE OF AUTHORITY
MPE CONSULTING ENGINEERS Inc.
No. 558
ARKANSAS ENGINEER
STATE OF ARKANSAS
REGISTERED PROFESSIONAL ENGINEER
No. 5030
DOUGLAS F. BOWEN
10-17-16

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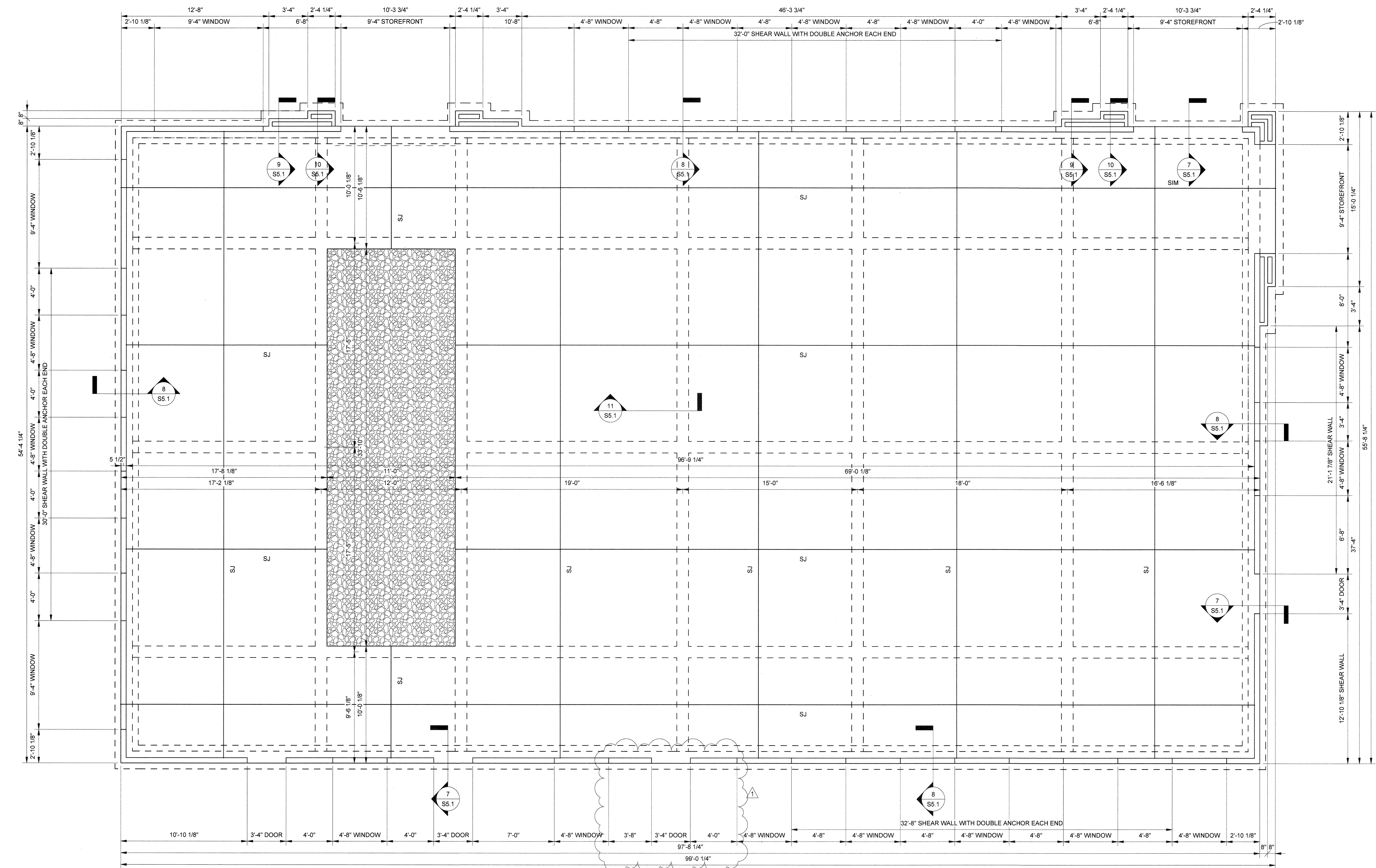
PLUMBING RISERS



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40 SHAKLEFORD PLAZA, SUITE 200, LITTLE ROCK, ARKANSAS 72211
(501) 221-8181, TELEPHONE (501) 221-8353, FAX

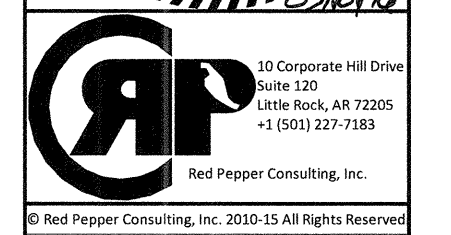
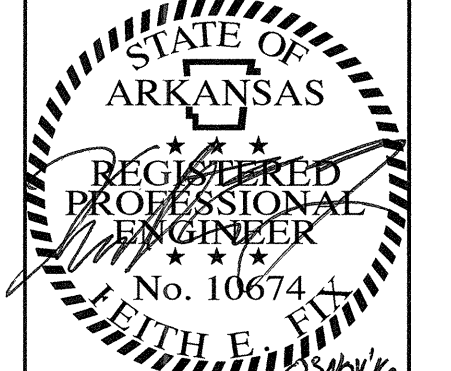
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1 FOUNDATION PLAN
S1.1 1/4" = 1'-0"

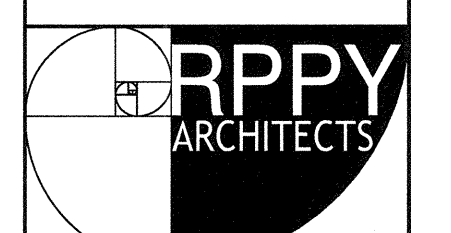
ROARK PERKINS PERRY YELVINGTON ARCHITECTURE INTERIOR DESIGN
713 W. SECOND STREET LITTLE ROCK, AR 72201-2287
(501)372-2272 www.rpparchitects.com

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Highway 5 Bryant, Arkansas



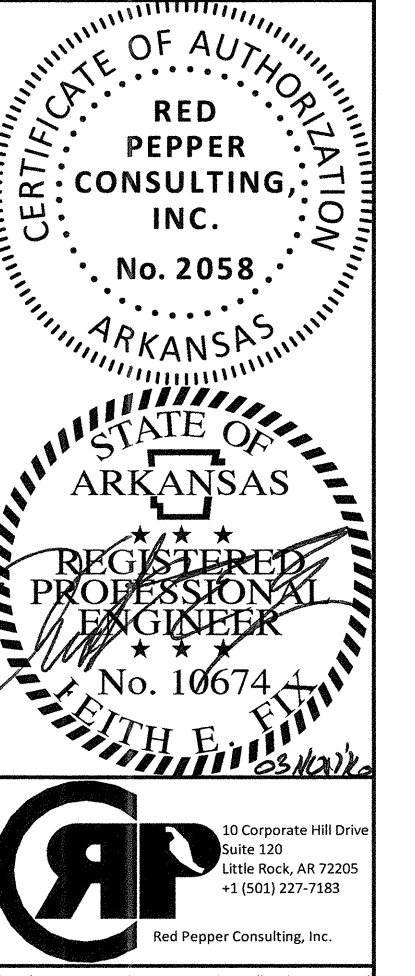
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| ADD 1 | 11 NOV '16 |
| REVISION | DATE |

FOUNDATION PLAN



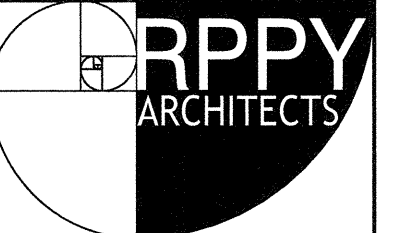
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| 10-13-2016 | 1549 |
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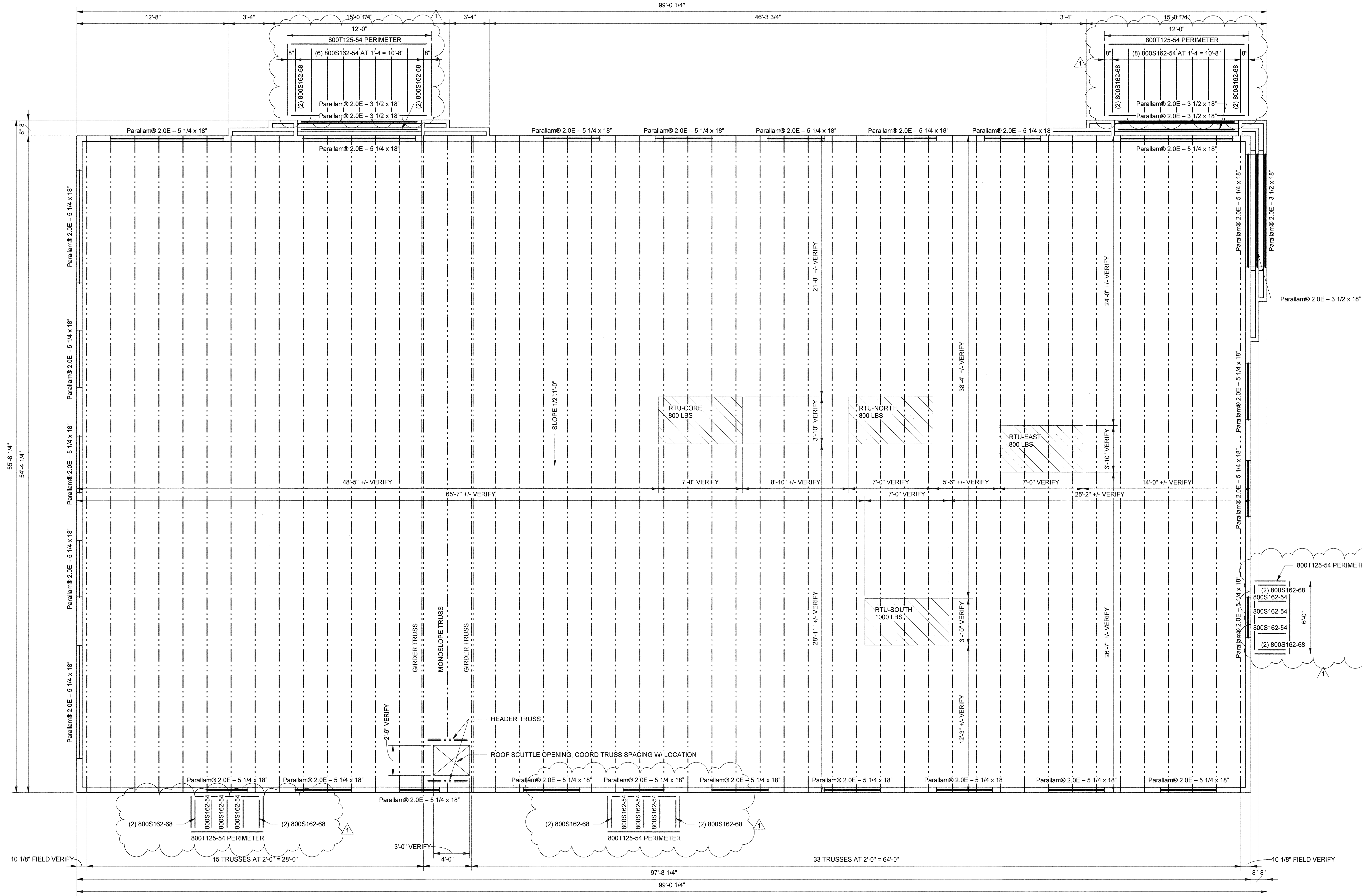


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| REVISION | DATE |

FRAMING PLAN

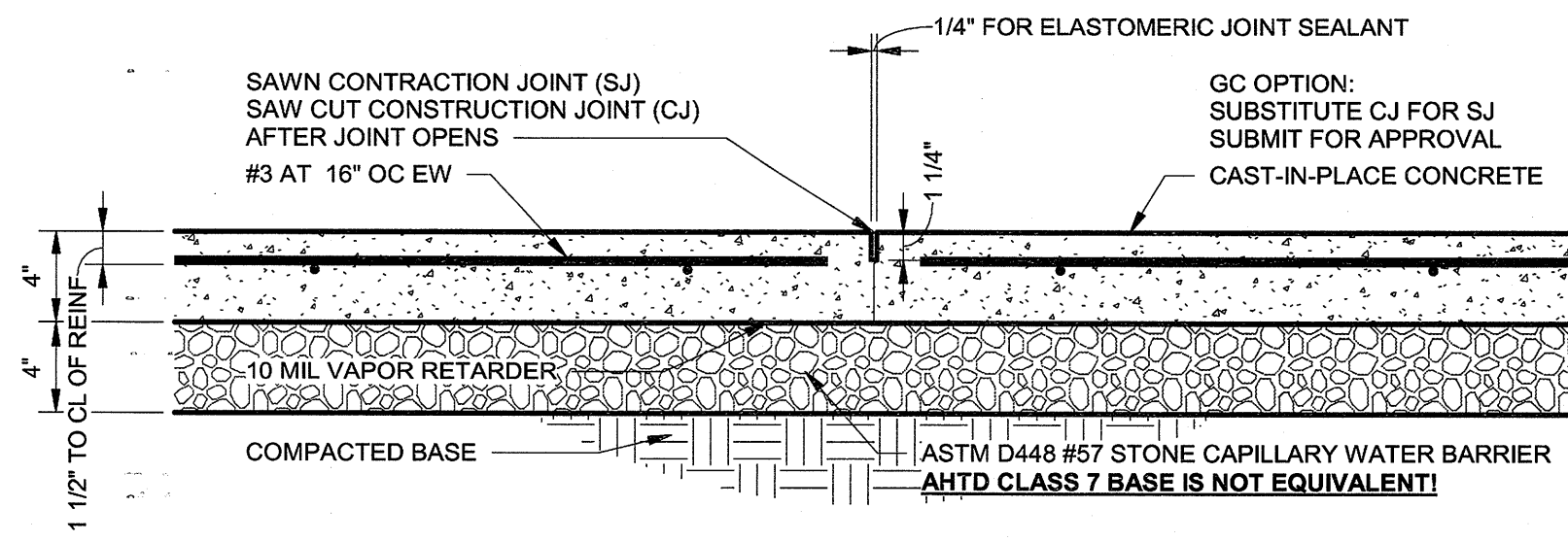


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| DATE | JOB NO. |
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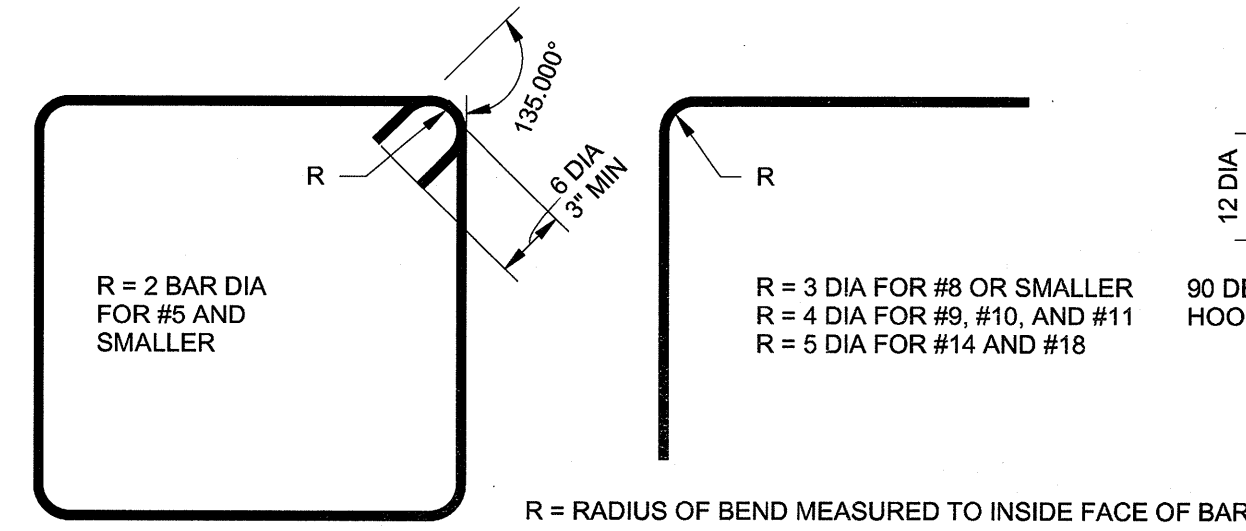


1 FRAMING PLAN - TRUSS BEARING
 S1.2 1/4" = 1'-0"

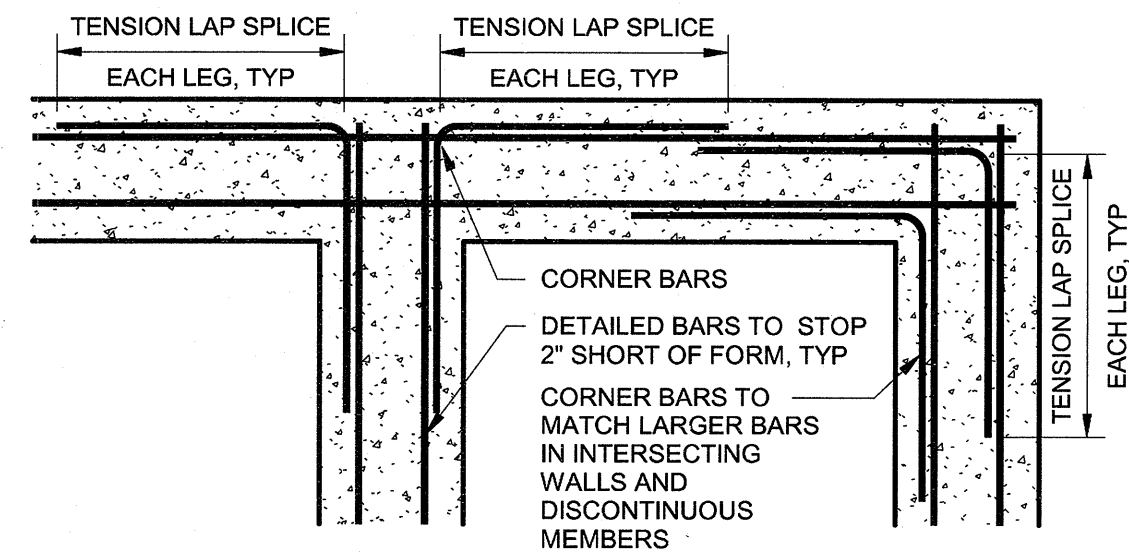
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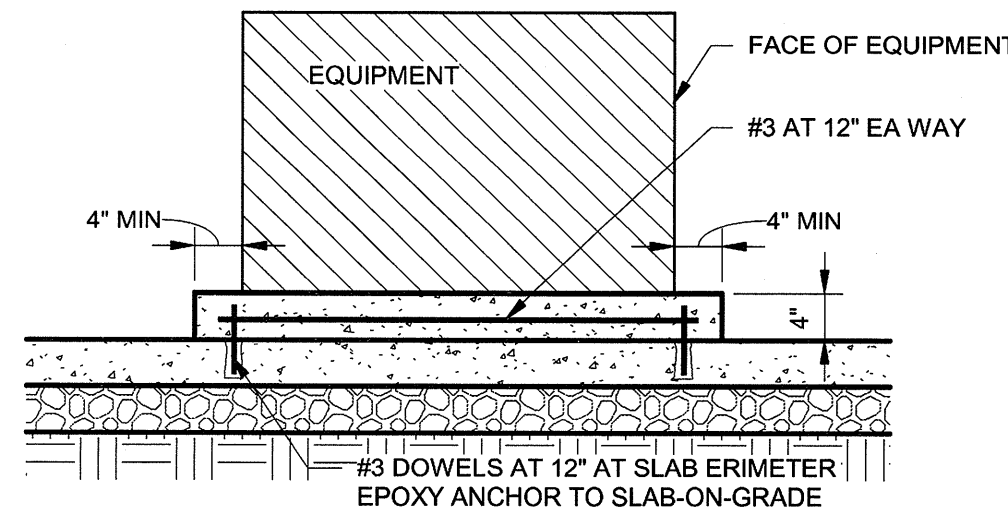
1 SLAB-ON-GRADE, 4"
S5.1 1 1/2" = 1'-0"



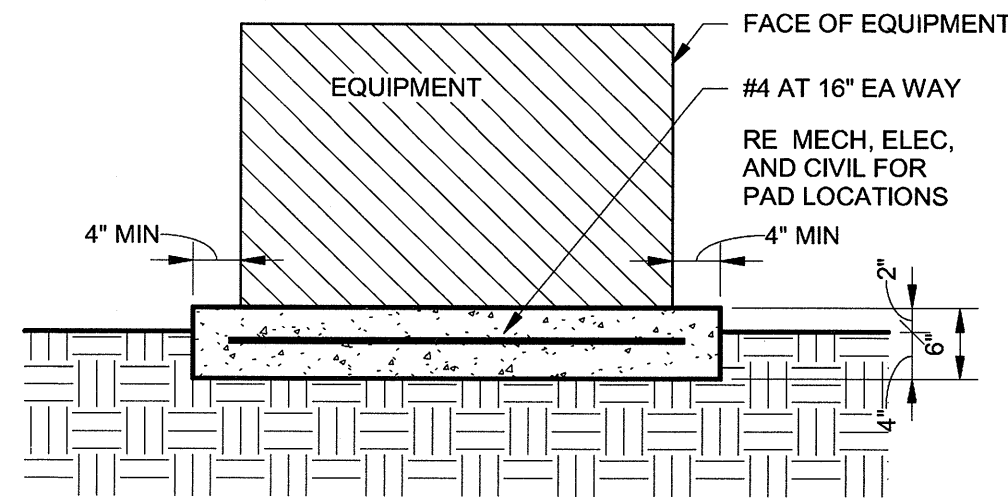
2 TYP BAR BENDING DETAIL
S5.1 3/4" = 1'-0"



3 TYP WALL CORNER REINFORCING
S5.1 3/4" = 1'-0"



4 TYP HOUSEKEEPING PAD
S5.1 3/4" = 1'-0"

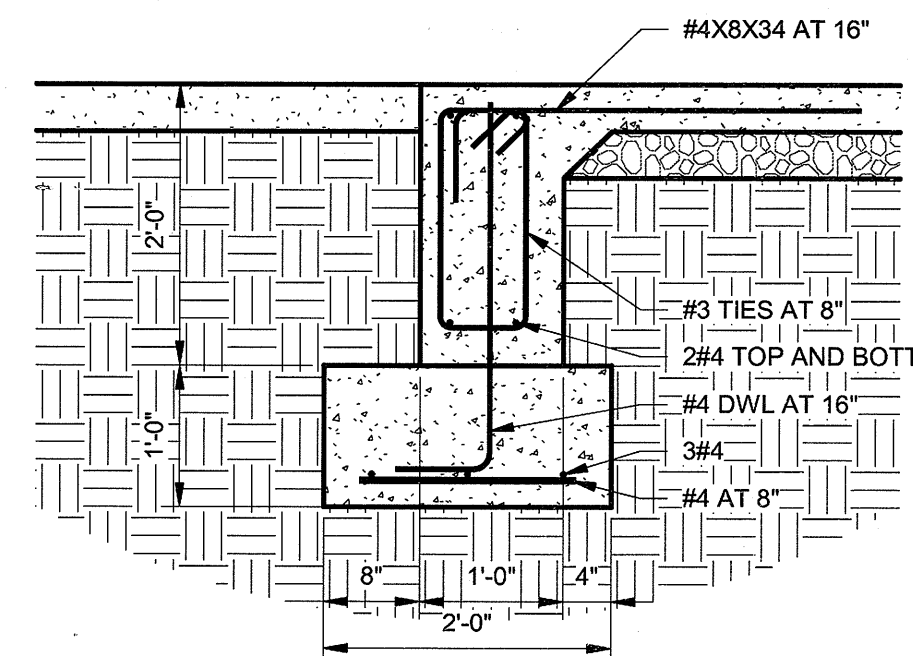


6 TYP EXT EQUIP PAD
S5.1 3/4" = 1'-0"

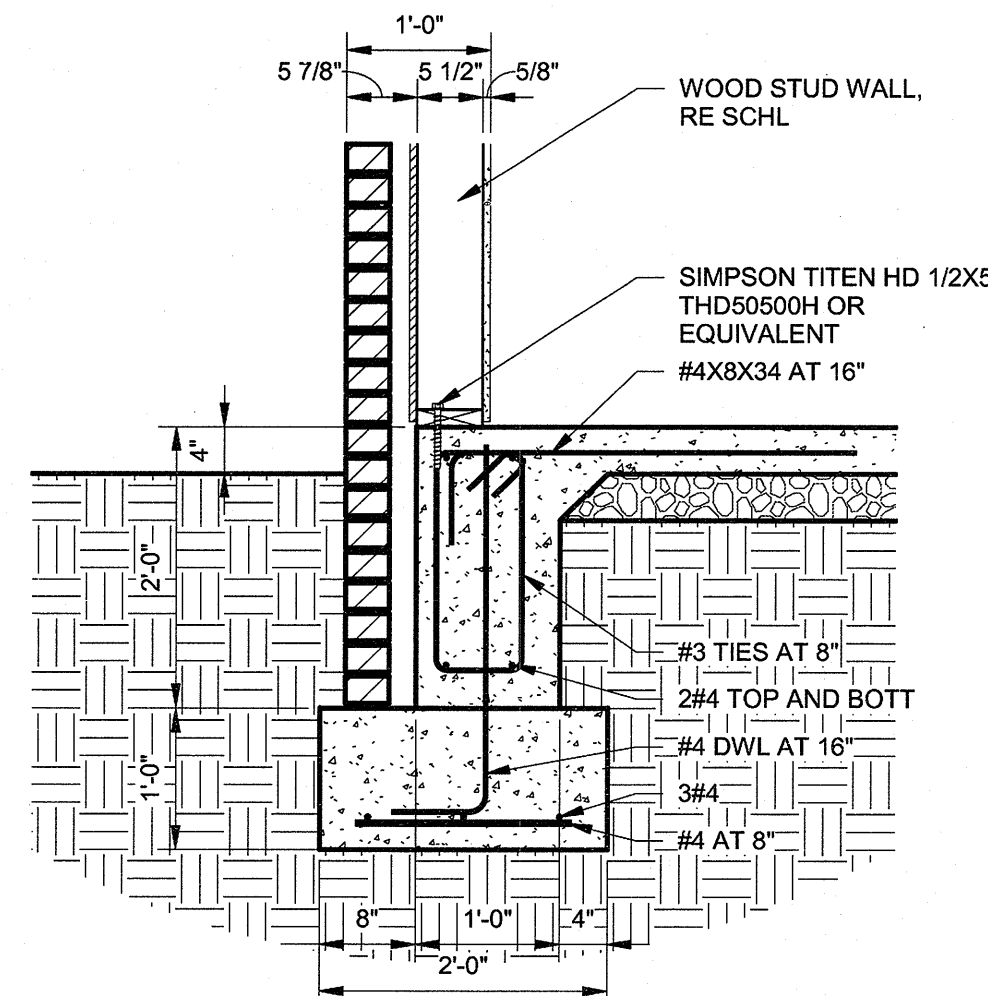
| Bar Size | Concrete Compressive Strength f _c = 2500 psi | | Concrete Compressive Strength f _c = 3600 psi | | Concrete Compressive Strength f _c = 5625 psi | |
|----------|---|---------------|---|---------------|---|---------------|
| | Development Length | Splice Length | Development Length | Splice Length | Development Length | Splice Length |
| Position | Bottom Bar | Top Bar | Bottom Bar | Top Bar | Bottom Bar | Top Bar |
| #3 | 18" | 24" | 31" | 15" | 20" | 25" |
| #4 | 24" | 31" | 41" | 20" | 26" | 34" |
| #5 | 30" | 39" | 51" | 25" | 33" | 42" |
| #6 | 36" | 47" | 61" | 30" | 39" | 51" |
| #7 | 53" | 68" | 89" | 44" | 57" | 74" |
| #8 | 60" | 78" | 101" | 50" | 65" | 85" |
| #9 | 68" | 88" | 114" | 56" | 73" | 95" |
| #10 | 76" | 99" | 129" | 64" | 83" | 107" |
| #11 | 85" | 110" | 143" | 71" | 92" | 119" |
| #14 | 102" | 132" | Not Permitted | 85" | 110" | 68" |
| #18 | 135" | 176" | Not Permitted | 113" | 147" | 90" |

Development and Lap Splice Table Notes:
 1. Furnish and install deformed bar reinforcing according to tabulated development lengths and splice lengths.
 2. Furnish and install deformed bar reinforcing according to lengths tabulated for "Top Bars" wherever placing more than 12" fresh concrete beneath the rebar placed horizontally, otherwise furnish and install deformed bar reinforcing according to lengths tabulated for "Bottom Bars".
 3. Furnish and install deformed bar reinforcing to lengths tabulated for concrete compressive strength, f_c = 2,500 psi, except compressive strength, f_c, more than 3,600 psi and 5,625 psi, contractor may furnish and install according to shorter tabulated lengths for greater compressive strength.
 4. Furnish and install deformed bar reinforcing placed in lightweight concrete according to tabulated lengths multiplied by four-thirds (4/3).

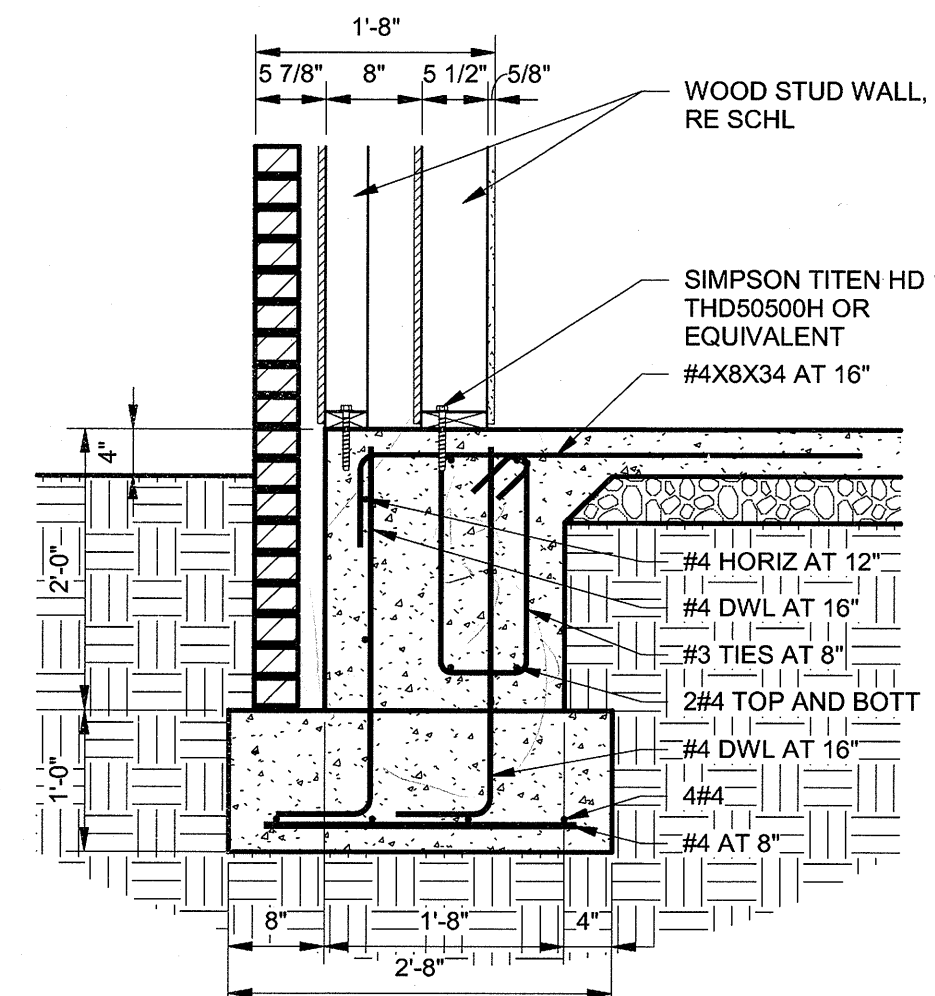
5 LAP SPLICE SCHEDULE
S5.1 3/4" = 1'-0"



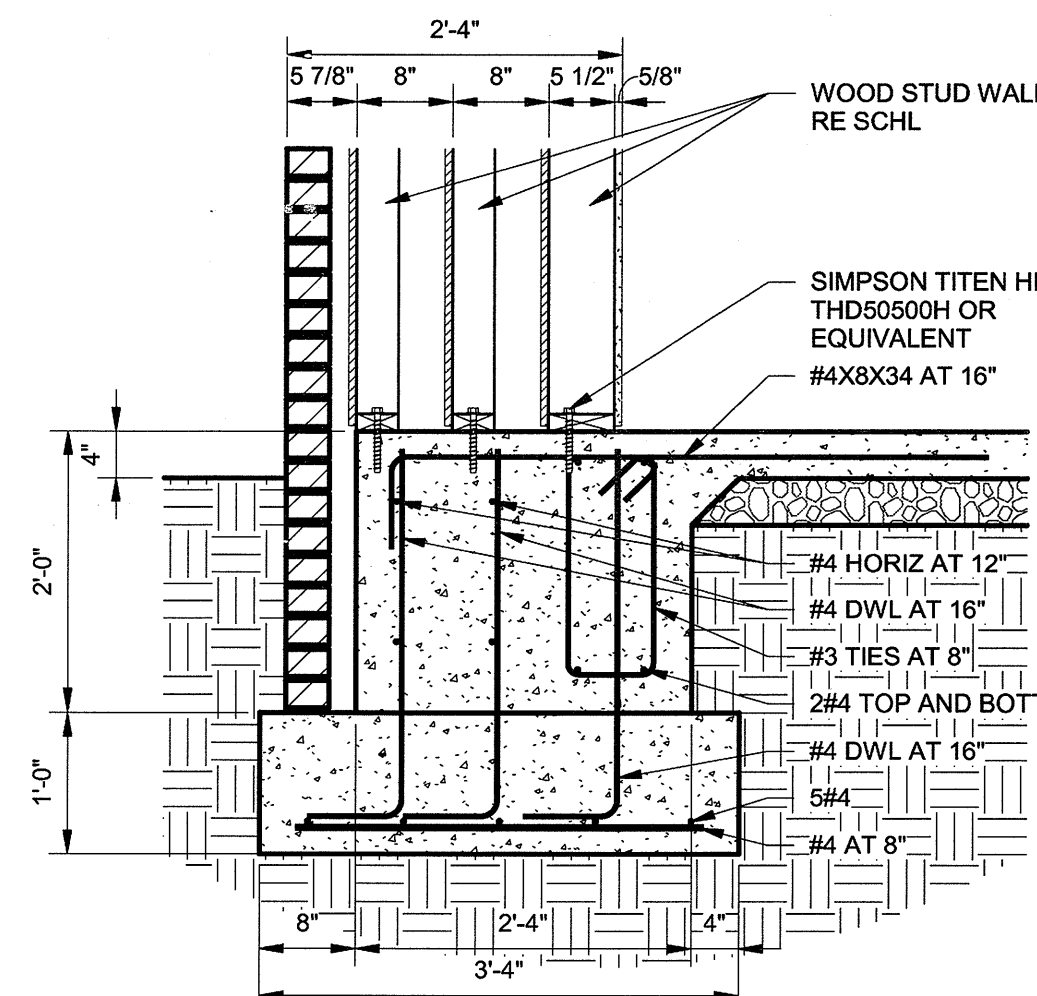
7 WALL FOUNDATION AT DOOR
S5.1 3/4" = 1'-0"



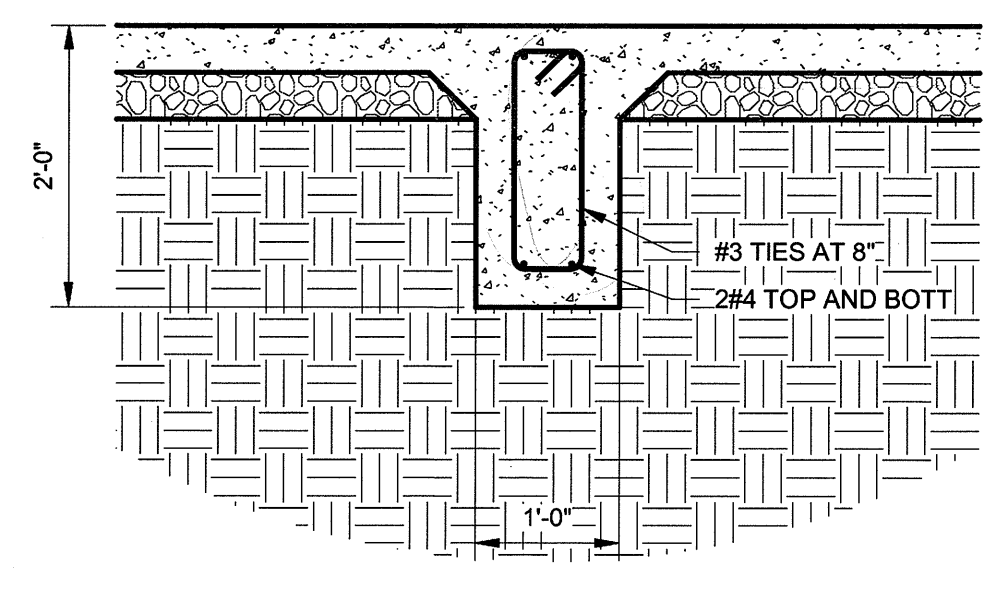
8 WALL FOUNDATION, TYP
S5.1 3/4" = 1'-0"



9 WALL FOUNDATION AT 8" WALL OFFSET
S5.1 3/4" = 1'-0"



10 WALL FOUNDATION AT 16" WALL OFFSET
S5.1 3/4" = 1'-0"



11 INTERIOR GRADE BEAM
S5.1 3/4" = 1'-0"

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(501) 572-0272 www.rppr.com

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Highway 5 Bryant, Arkansas

CERTIFICATE OF AUTHORIZATION
RED PEPPER CONSULTING INC.
No. 2058
ARKANSAS
STATE OF ARKANSAS
REGISTERED PROFESSIONAL ENGINEER
No. 10674
LEITH E. FULTON

Red Pepper Consulting, Inc.
10 Corporate Hill Drive
Suite 120
Little Rock, AR 72205
+1 (501) 227-7183

REVISION DATE

FOUNDATION DETAILS

RPPY ARCHITECTS

10-13-2016 1549

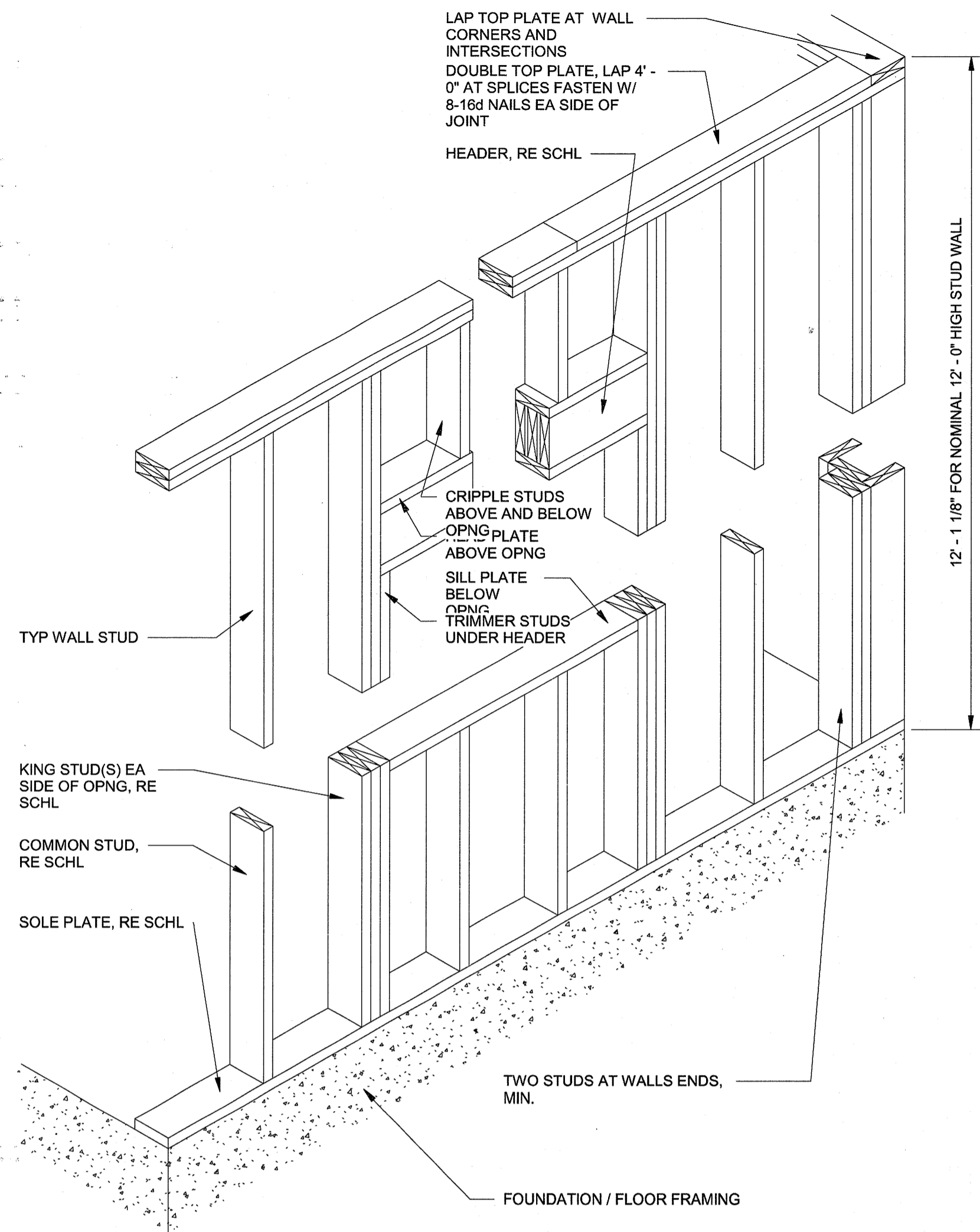
DATE JOB NO.

S5.1 7

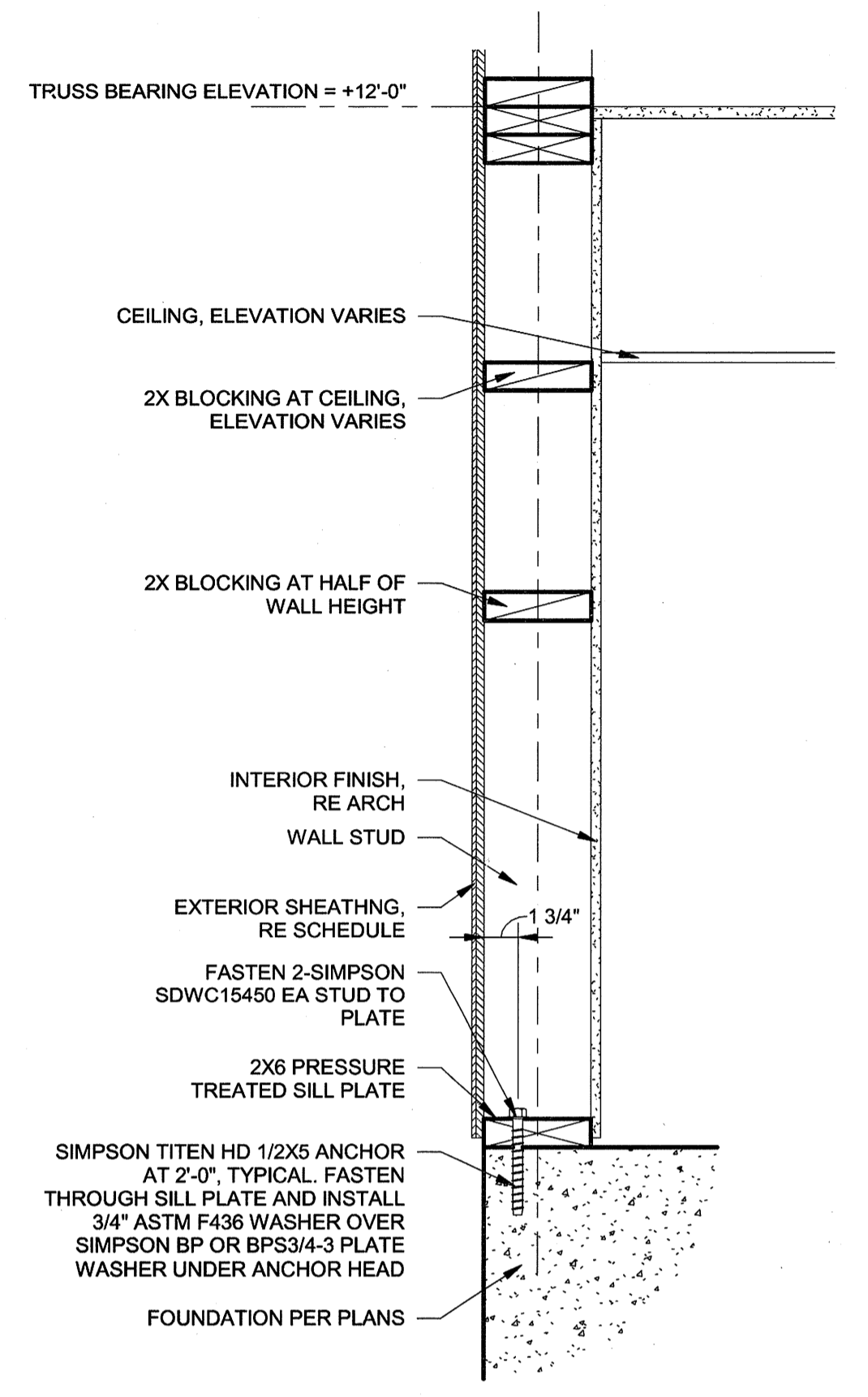
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10/13/2016 12:54:35 PM



| WOOD STUD WALL SCHEDULE | | | | | |
|----------------------------|--------------------|--|--|--|--|
| LOCATION | DESCRIPTION | MATERIALS | | | REMARKS |
| | | STUDS | HEADER UNO | SHEATHING | |
| TRUSS BEARING WALLS | 6" STUD WALL | NO. 2 GRADE SPRUCE-PINE-FIR (SOUTH) NOMINAL 2X6 AT 12" O.C. TYP., AT 12" ABOVE AND BELOW OPNG. | BUILT-UP HEADER: 3-2X8 W/ 1/2 PLYWOOD SPACERS AND 2X6 TOP AND BOT; ONE TRIMMER STUD EA END | 5/8" TECO RATED STRUCTURAL I FASTEN EDGES TO FRAMING W/ 10d COMMON NAILS AT 6" OC AT PANEL EDGES, AT 12" IN FIELD. | ADDITIONAL STUDDING REQ'D AT STOREFRONT OPENINGS; LVL HEADERS WHERE NOTED. |
| EXTERIOR END WALLS | 6" STUD WALL | NO. 2 GRADE SPRUCE-PINE-FIR (SOUTH) NOMINAL 2X6 AT 24" O.C. TYP., AT 12" ABOVE AND BELOW OPNG. | BUILT-UP HEADER: 3-2X8 W/ 1/2 PLYWOOD SPACERS AND 2X6 TOP AND BOT; ONE TRIMMER STUD EA END | 5/8" TECO RATED STRUCTURAL I FASTEN EDGES TO FRAMING W/ 10d COMMON NAILS AT 6" OC AT PANEL EDGES, AT 12" IN FIELD. | ADDITIONAL STUDDING REQ'D AT STOREFRONT OPENINGS; LVL HEADERS WHERE NOTED. |
| BEARING WALL SHEAR WALLS | 6" STUD WALL | NO. 2 GRADE SPRUCE-PINE-FIR (SOUTH) NOMINAL 2X6 AT 12" O.C. TYP., AT 12" ABOVE AND BELOW OPNG. | BUILT-UP HEADER: 3-2X8 W/ 1/2 PLYWOOD SPACERS AND 2X6 TOP AND BOT; ONE TRIMMER STUD EA END | 5/8" TECO RATED STRUCTURAL I FASTEN EDGES TO FRAMING W/ 10d COMMON NAILS AT 4" OC AT PANEL EDGES, AT 12" IN FIELD. | BLOCK ALL SHEAR WALLS AT PANEL EDGES |
| END WALL SHEAR WALLS | 6" STUD WALL | NO. 2 GRADE SPRUCE-PINE-FIR (SOUTH) NOMINAL 2X6 AT 24" O.C. TYP., AT 24" ABOVE AND BELOW OPNG. | BUILT-UP HEADER: 3-2X8 W/ 1/2 PLYWOOD SPACERS AND 2X6 TOP AND BOT; ONE TRIMMER STUD EA END | 5/8" TECO RATED STRUCTURAL I FASTEN EDGES TO FRAMING W/ 10d COMMON NAILS AT 6" OC AT PANEL EDGES, AT 12" IN FIELD. | BLOCK ALL SHEAR WALLS AT PANEL EDGES |
| PARAPET WALLS < 4'-0" TALL | 6" STUD WALL | NO. 2 GRADE SPRUCE-PINE-FIR (SOUTH) NOMINAL 2X6 AT 24" O.C. TYP., AT 24" ABOVE AND BELOW OPNG. | BUILT-UP HEADER: 3-2X8 W/ 1/2 PLYWOOD SPACERS AND 2X6 TOP AND BOT; ONE TRIMMER STUD EA END | 5/8" TECO RATED STRUCTURAL I FASTEN EDGES TO FRAMING W/ 10d COMMON NAILS AT 6" OC AT PANEL EDGES, AT 12" IN FIELD. | |
| PARAPET WALLS > 4'-0" TALL | 6" STUD WALL | NO. 2 GRADE SPRUCE-PINE-FIR (SOUTH) NOMINAL 2X6 AT 24" O.C. TYP., AT 24" ABOVE AND BELOW OPNG. | BUILT-UP HEADER: 3-2X8 W/ 1/2 PLYWOOD SPACERS AND 2X6 TOP AND BOT; ONE TRIMMER STUD EA END | 5/8" TECO RATED STRUCTURAL I FASTEN EDGES TO FRAMING W/ 10d COMMON NAILS AT 6" OC AT PANEL EDGES, AT 12" IN FIELD. | |
| INTERIOR BEARING WALL | 4" METAL STUD WALL | RE METAL STUD WALL SCHEDULE | RE METAL STUD WALL SCHEDULE | RE METAL STUD WALL SCHEDULE | |
| INTERIOR SHEAR WALL | 4" METAL STUD WALL | RE METAL STUD WALL SCHEDULE | RE METAL STUD WALL SCHEDULE | RE METAL STUD WALL SCHEDULE | |
| INTERIOR NON-BEARING WALL | METAL STUD WALL | RE ARCH | RE ARCH | RE ARCH | |

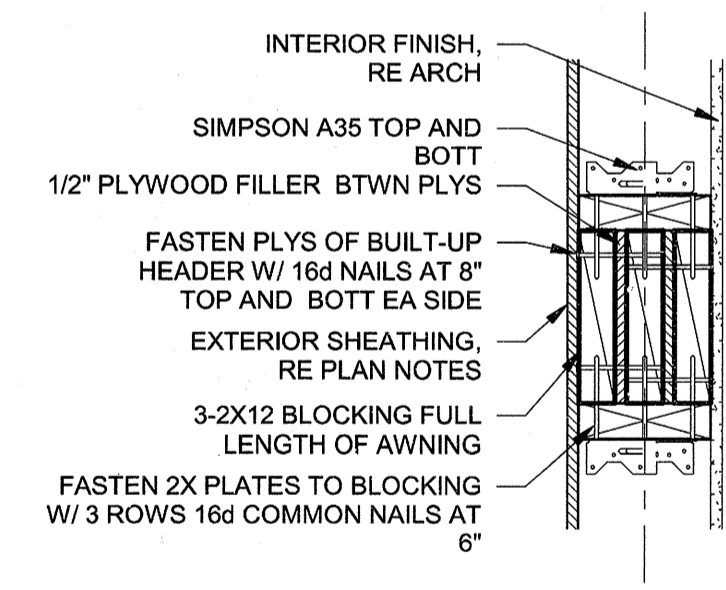


1 WOOD WALL SCHEDULE
S6.1 3/4" = 1'-0"

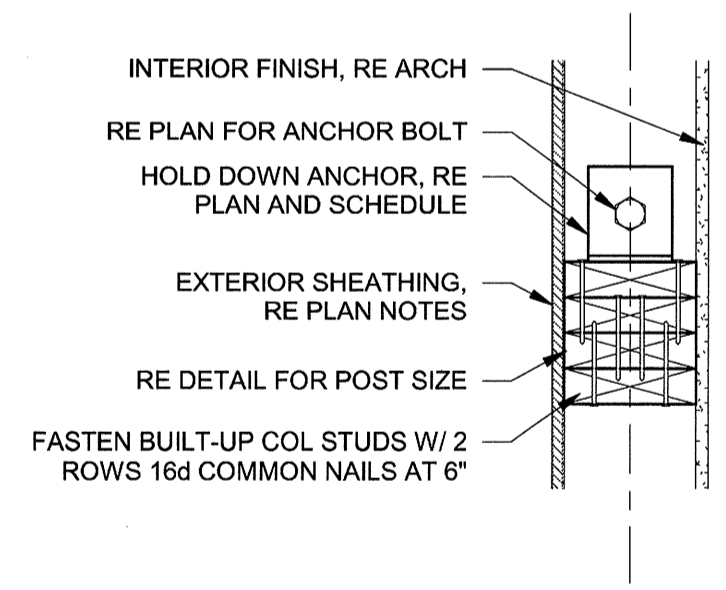
2 TYPICAL WALL BLOCKING
S6.1 1 1/2" = 1'-0"

| CONNECTION | LOCATION | NAILING |
|--|---------------------------------------|----------------|
| 1. JOIST TO SILL OR GIRDER | TOENAIL | 3-8d |
| 2. BRIDGING TO JOIST | TOENAIL EACH END | 2-8d |
| 3. 1" X 6" SUBFLOOR OR LESS TO JOIST | FACE NAIL | 2-8d |
| 4. WIDER THAN 1" X 6" SUBFLOOR TOP JOIST | FACE NAIL | 3-8d |
| 5. 2" SUBFLOOR TO GIRDER | BLIND AND FACE NAIL | 2-16d |
| 6. SOLE PLATE TO JOIST OR BLOCKING | TYPICAL FACE NAIL | 1-16d AT 16" |
| | BRACED WALL PANELS | 3-16d AT 16" |
| 7. TOP PLATE TO STUD | END NAIL | 2-16d |
| 8. STUD TO SOLE PLATE | TOENAIL | 4-8d |
| | END NAIL | 2-16d |
| 9. DOUBLE STUDS | FACE NAIL | 1-16d AT 24" |
| 10. DOUBLE TOP PLATES | TYPICAL FACE NAIL | 1-16d AT 16" |
| | LAP SPLICE | 8-16d |
| 11. BLOCKING BETWEEN JOISTS OR RAFTERS TO TOP PLATE | TOENAIL | 3-8d |
| 12. RIM JOIST TO TOP PLATE | TOENAIL | 1-8d AT 6" |
| 13. TOP PLATES, LAP AND INTERSECTION | FACE NAIL | 2-16d |
| 14. CONTINUOUS HEADER, TWO PIECES | ALONG EDGE | 1-16d AT 16" |
| 15. CEILING JOISTS TO PLATE | TOENAIL | 3-8d |
| 16. CONTINUOUS HEADER TO STUD | TOENAIL | 4-8d |
| 17. CEILING JOISTS, LAPS OVER PARTITIONS | FACE NAIL | 3-16d, MINIMUM |
| 18. CEILING JOISTS TO PARALLEL RAFTERS | FACE NAIL | 3-16d, MINIMUM |
| 19. RAFTER TO PLATE | TOENAIL | 3-8d |
| 20. 1" DIAGONAL BRACE TO EACH STUD AND PLATE | FACE NAIL | 2-8d |
| 21. 1" X 8" SHEATHING OR LESS TO EACH BEARING | FACE NAIL | 3-8d |
| 22. WIDER THAN 1" X 8" SHEATHING TO EACH BEARING | FACE NAIL | 3-8d |
| 23. BUILT-UP CORNER STUDS | FACE NAIL | 1-16d AT 24" |
| 24. BUILT-UP GIRDER AND BEAMS | FACE NAIL, TOP AND BOT, STAGGERED | 1-20d AT 32" |
| | FACE NAIL, ENDS AND SPLICE AT BEARING | 2-20d |
| 25. 2" PLANKS | FACE NAIL | 1-16d |
| 26. COLLAR TIE TO RAFTER | FACE NAIL | 3-10d |
| 27. JACK RAFTER TO HIP | TOENAIL | 3-10d |
| | FACE NAIL | 2-16d |
| 28. ROOF RAFTER TO 2X RIDGE BEAM | TOENAIL | 2-16d |
| | FACE NAIL | 3-16d |
| 29. JOIST TO BAND JOIST | FACE NAIL | 3-16d |
| 30. LEDGER STRIP | FACE NAIL | 3-16d |
| 31. WOOD STRUCTURAL PANELS AND PARTICLEBOARD SUBFLOOR, ROOF, AND WALL SHEATHING TO FRAMING | 1/2" OR LESS | 6d |
| | 19/32" TO 3/4" | 8d or 6d |
| | 7/8" TO 1" | 8d |
| | 1 1/8" TO 1 1/4" | 10d or 8d |
| | 3/4" OR LESS | 6d |
| | 7/8" TO 1" | 8d |
| | 1 1/8" TO 1 1/4" | 10d or 8d |
| | 1/2" OR LESS | 6d |
| 32. PANEL SIDING TO FRAMING | 5/8" | 8d |
| | 1/2" | 6d |
| 33. FIBERBOARD SHEATHING | 25/32" | 8d |
| | 1/4" | 4d |
| 34. INTERIOR PANELING | 3/8" | 6d |

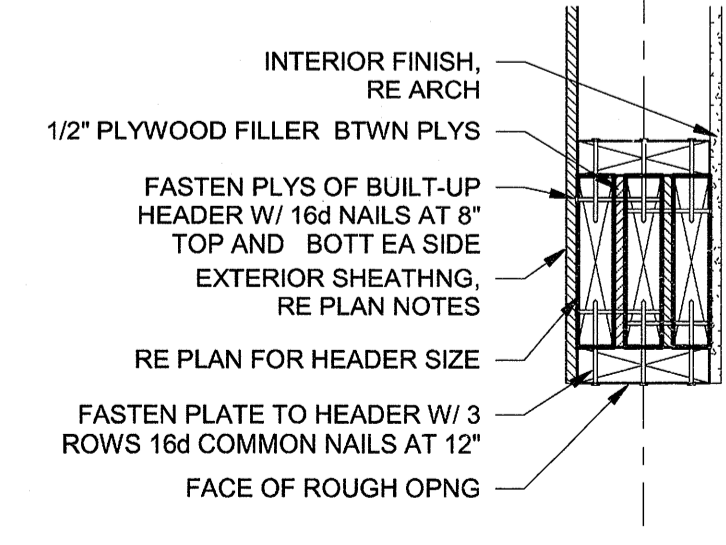
3 NAILING SCHEDULE - CODE MINIMUM
S6.1 1/2" = 1'-0"



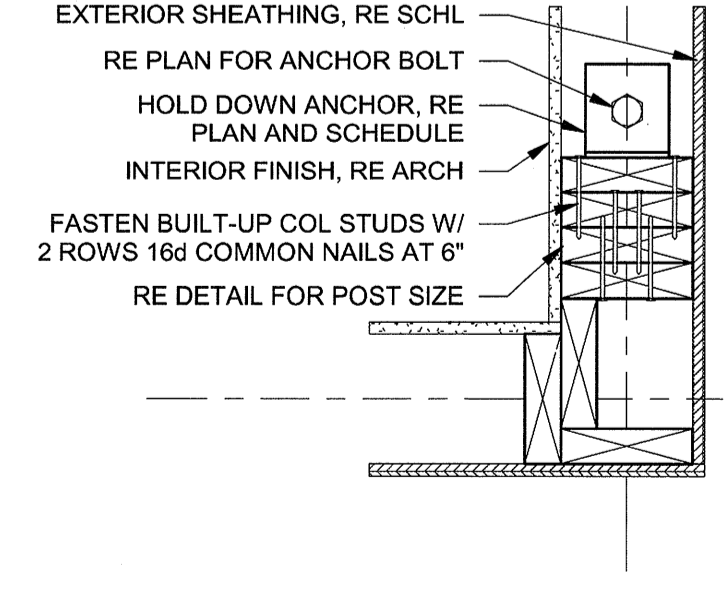
4 AWNING BLOCKING
S6.1 1 1/2" = 1'-0"



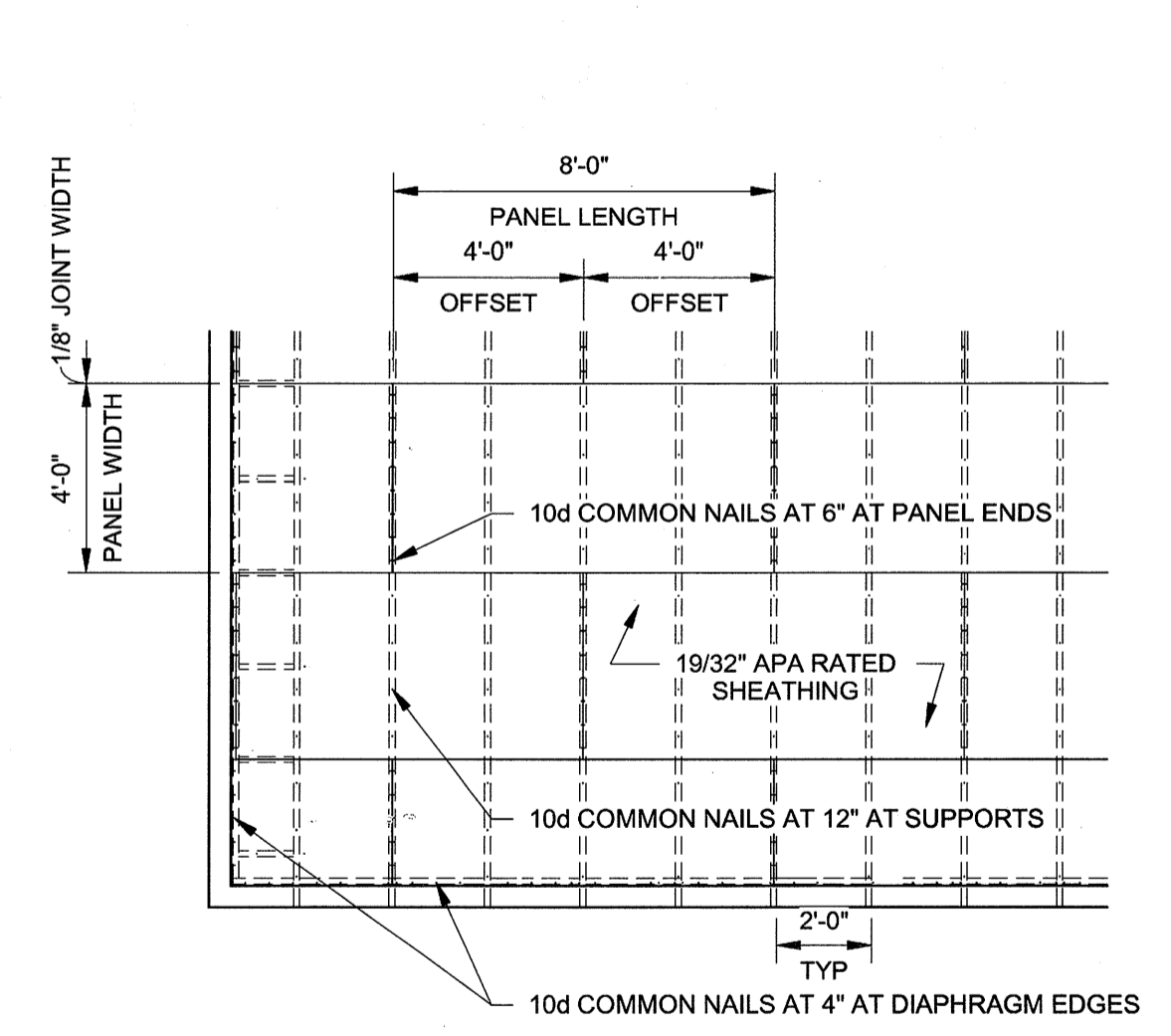
6 HOLD DOWN AT SHEAR WALL
S6.1 1 1/2" = 1'-0"



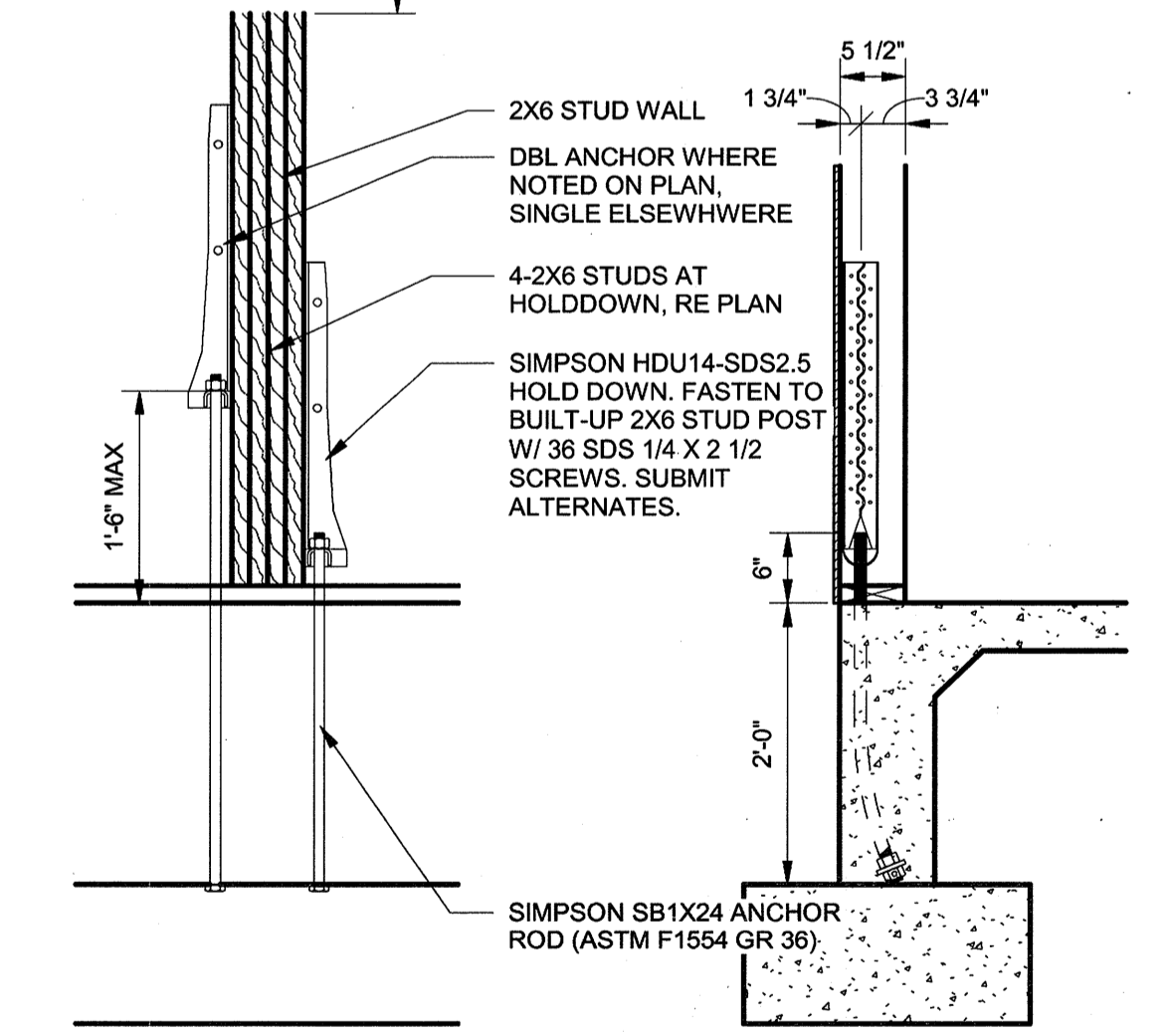
5 TYPICAL HEADER
S6.1 1 1/2" = 1'-0"



7 HOLD DOWN AT CORNER
S6.1 1 1/2" = 1'-0"



8 ROOF SHEATHING
S6.1 1/4" = 1'-0"



9 HOLD-DOWN ANCHOR
S6.1 3/4" = 1'-0"

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(501) 572-0272

Dental Clinic & Shell Building for
Dr. Clint Fulks
Highway 5 Bryant, Arkansas

CERTIFICATE OF AUTHORIZATION
RED PEPPER CONSULTING, INC.
No. 2058
ARKANSAS
STATE OF ARKANSAS
REGISTERED PROFESSIONAL ENGINEER
No. 10674
LEITH E. PEPPER

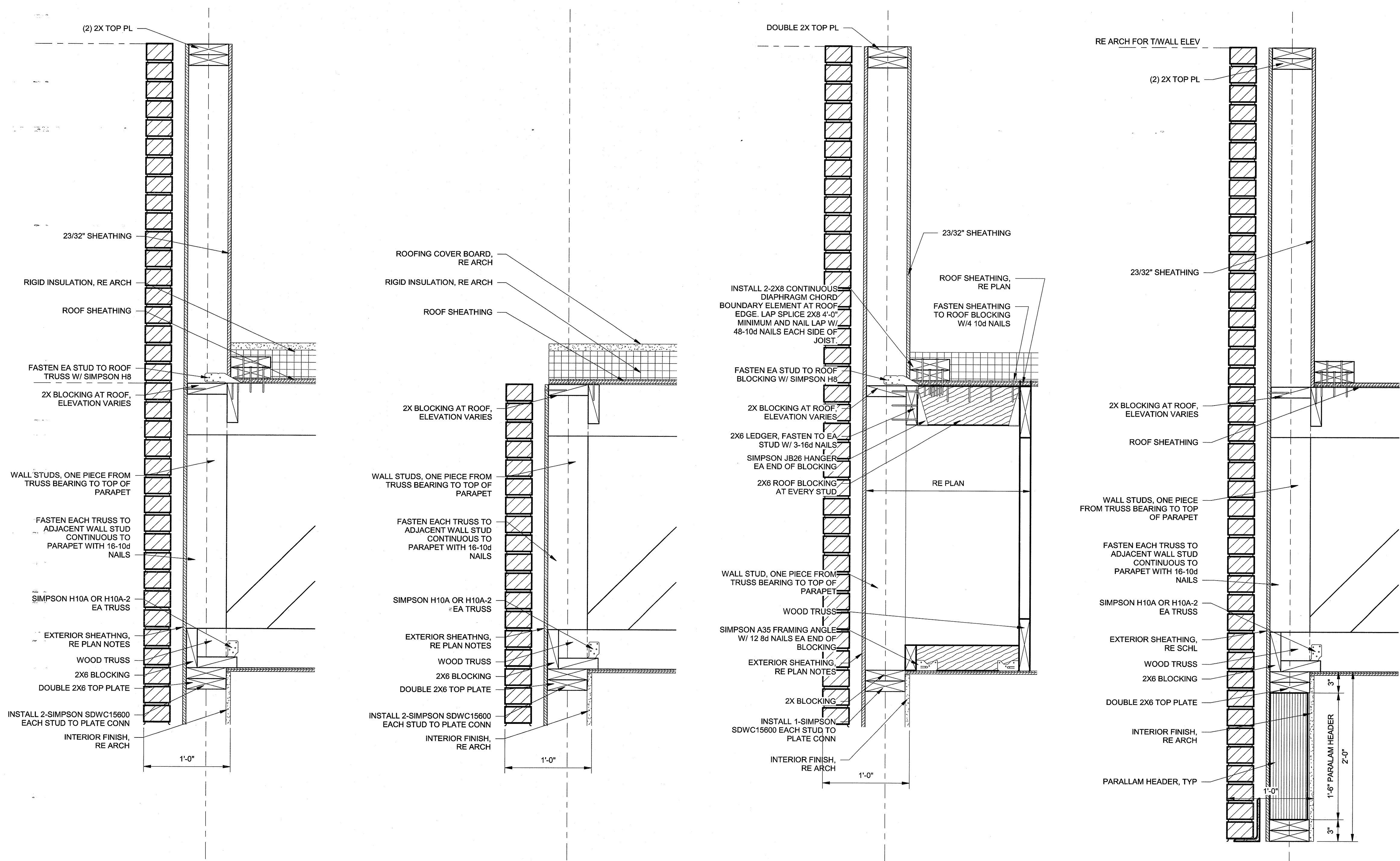
WOOD FRAMING DETAILS

RP ARCHITECTS

| | |
|------------|---------|
| 10-13-2016 | 1549 |
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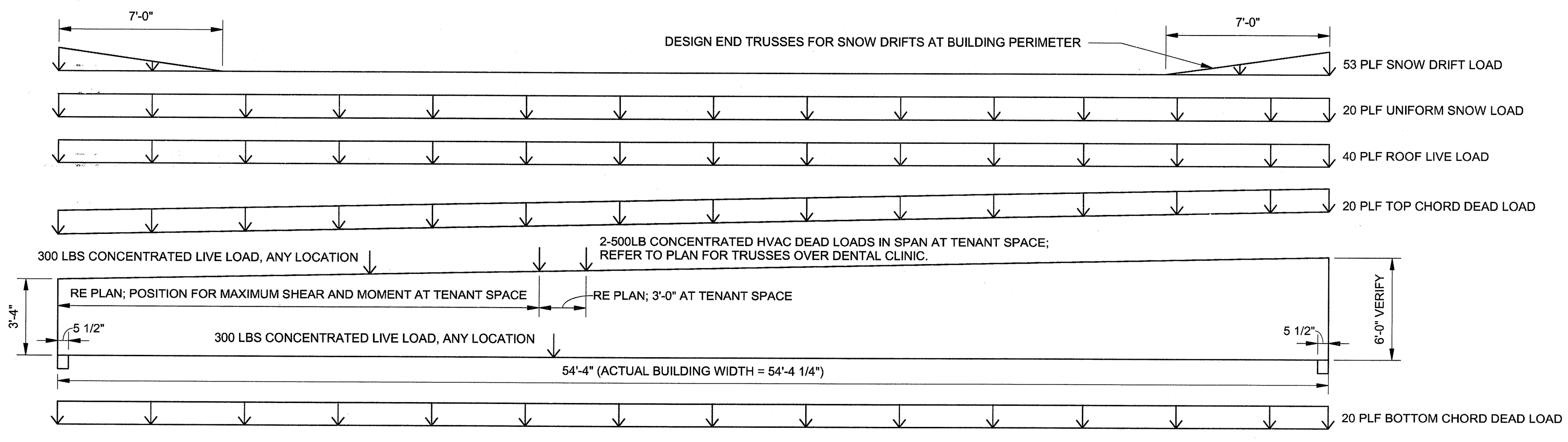


1 BEARING WALL DETAIL
S6.2 1 1/2" = 1'-0"

2 BEARING WALL DETAIL - NO PARAPET - NOT USED
S6.2 1 1/2" = 1'-0"

3 SIDE WALL DETAIL
S6.2 1 1/2" = 1'-0"

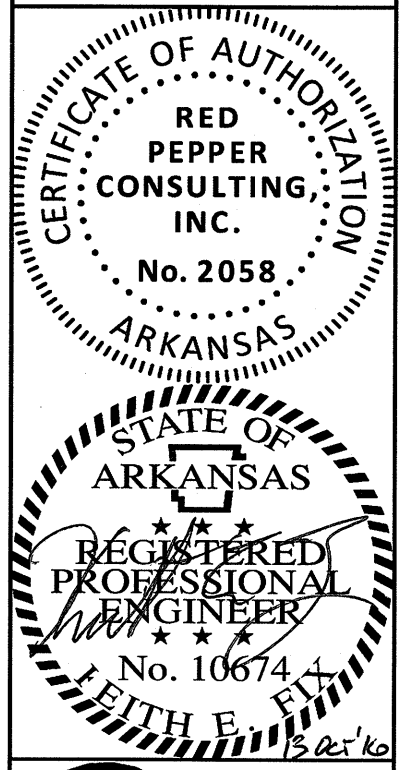
4 TRUSS BEARING AT OPENING
S6.2 1 1/2" = 1'-0"



5 TRUSS LOAD DIAGRAM
S6.2 1/4" = 1'-0"

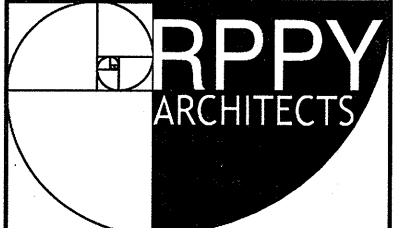
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Dental Clinic & Shell Building for
Dr. Clint Fulks
Highway 5 Bryant, Arkansas



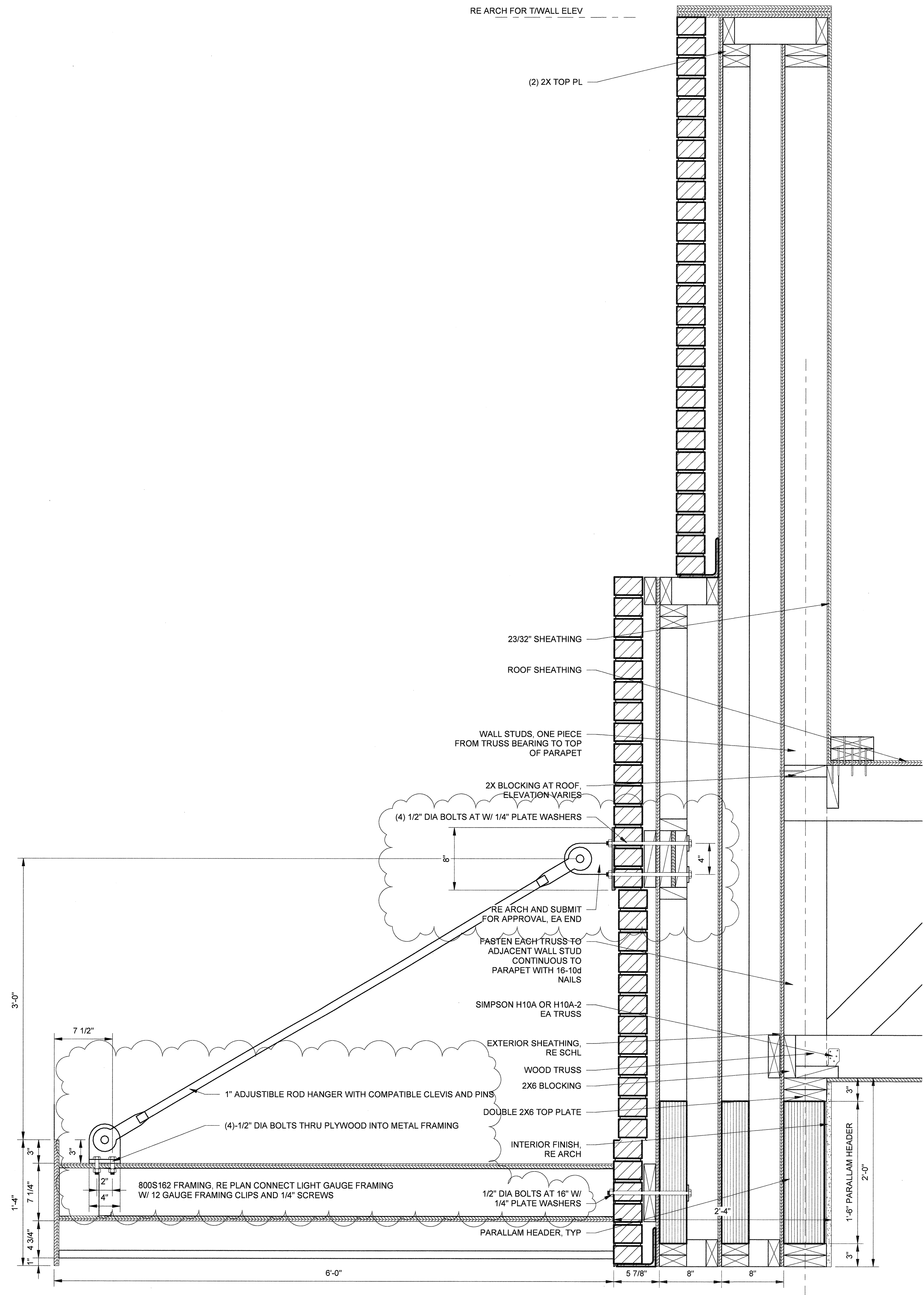
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WOOD FRAMING DETAILS



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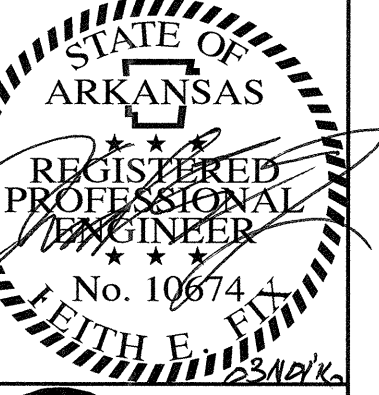
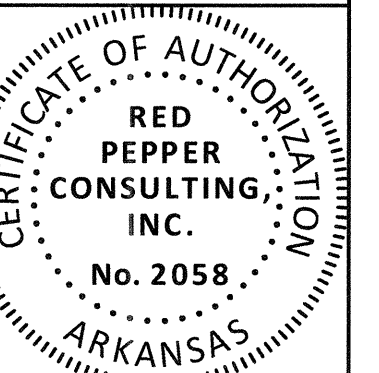


1 TRUSS BEARING AT STOREFRONT
S6.3 1 1/2" = 1'-0"

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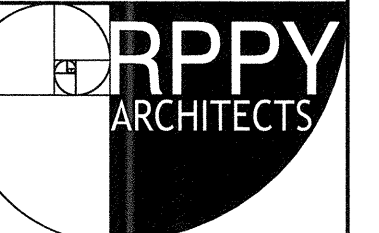
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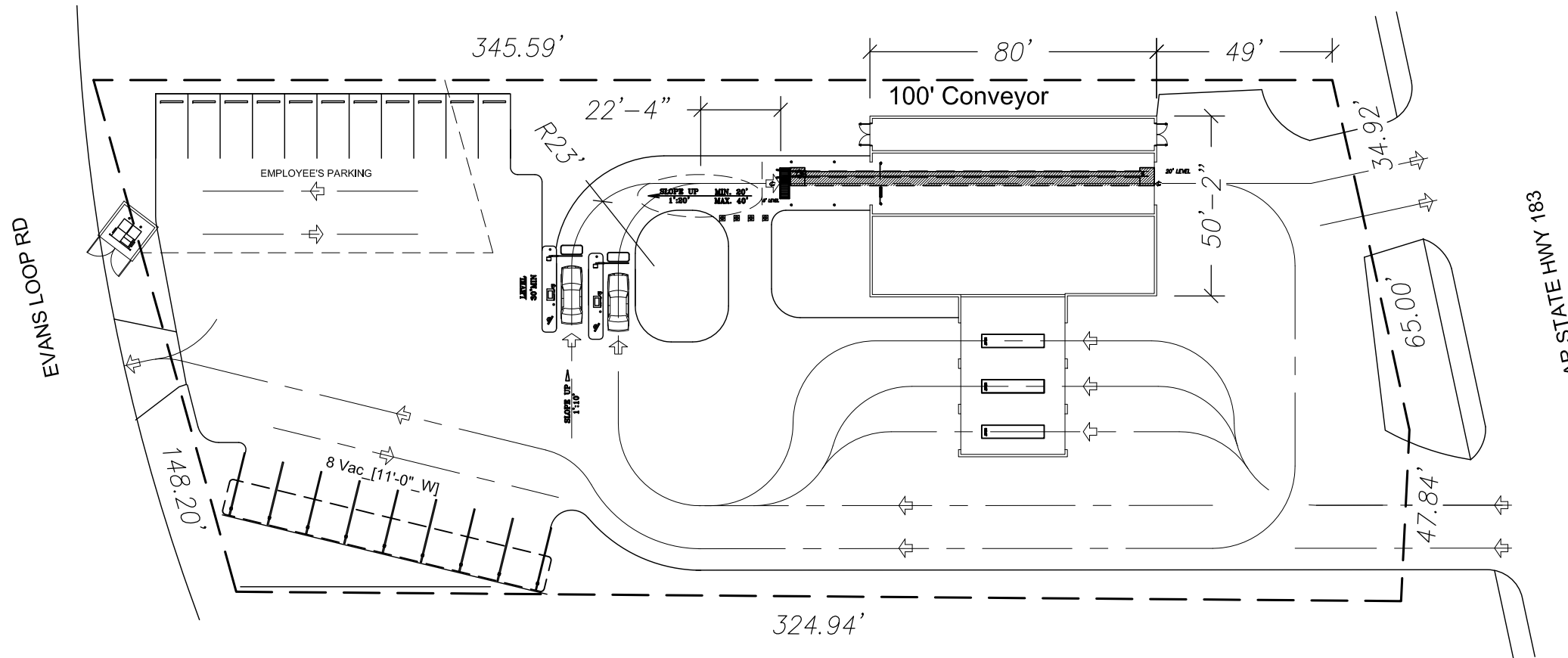
WOOD FRAMING DETAILS



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S6.3 7
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SITE LEGEND

- HANDICAP PARKING
- PROPOSED CURB
- SITE BOUNDARY LINE
- CENTER LINE OF ROAD
- SETBACKS

GENERAL NOTES

1. ALL CENTER LINE OF ROAD CURB RADII TO BE 23' UNLESS OTHERWISE NOTED.
2. ALL VACUUM SPACES ARE 9'-10" UNLESS OTHERWISE NOTED.

PRELIMINARY PLAN NOTE

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16530-C11-MARK MACCASLIN

SCALE: N.T.S.

LOCATION: AR

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SITE LAYOUT

"DRAFT"

| | |
|----------------|----------|
| DATE: | 11.02.16 |
| REVISION DATE: | 12.13.16 |
| CREATED BY: | LV |
| REVISED BY: | BPW |
| CHECKED BY: | |



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