January 8, 2020

ADDENDUM NUMBER THREE (3)

Project: Replacement Facility for
Tippah County Hospital
Ripley, MS
PN: 18015

FROM: Dean and Dean/Associates Architects, P.A.
4400 Old Canton Road, Suite 200
Jackson, MS 39211
(601) 939-7717

The following additions, changes, clarifications and/or substitutions to the Project Drawings as indicated, are hereby made a part of the Contract Documents. Acknowledge receipt of this Addendum by inserting its number and date in the Proposal Form where indicated.

Clarifications

Item #1: Advertisement For Bids, change fourth paragraph to read as follows:

Each proposal must be accompanied by a bid bond or certified check in an amount equal to 5% of the bid, payable to Tippah County, Mississippi as bid security.

Item #2: The following drawings are issued to clarify the existing foundations for the adjacent nursing home and "A" south hospital wing. Work for the new replacement hospital is in close proximity to these two buildings. Contractor to coordinate and protect existing buildings from damage during construction.

Nursing Home
Sheet S-1 – Foundation Framing Plan
Sheet S-2 – First Floor Framing Plan
Sheet S-4 – Foundation Sections

"A" South Hospital Wing
Sheet A-3R – Floor Plan
Sheet A-9 – Building Section
Sheet S-1 – Foundation Plan

Item #3: Attached is the Attendance Roster for the Pre-Bid Conference held onsite on Monday, January 6, 2020 at 10:30 a.m. This is for informational purposes only.

Item #4: Contractors Parking:

Sheet G002 shows the proposed area for Contractor designated parking. It is the Contractor's responsibility to install and maintain any needed gravel or improvements to this area. Contractor to smooth grade area and turn back over to the Owner at completion of project.

Item #5: Kitchen equipment shall be provided and installed by the Owner or Owner subcontractor. The General Contractor shall make all final utility connections such as power, water or gas as part of the base bid scope of work.

Item #6: The following Rooms listed below shall have a level 5 finish on all walls per specification section 092116:

- Classroom 121
- Dining Room 1000

Item #7: General Contractor shall provide insurance to cover Owner provided and Contractor installed/connected equipment which will be installed prior to Contractor completion of project and turning project over to Owner. Estimated value of this equipment is $1,655,000.

Item #8: The Contractor is responsible for relocating the existing exterior illuminated monument sign to new entrance drive near right-a-way. The exact location is to be field coordinated on site with Architect and Owner. The Contractor shall provide proper concrete foundation and electrical requirements for relocated sign. The electrical service to the existing location shall be terminated. Existing foundation to remain.

Architectural Specifications:

Item #1: Section 000101 – Project Title Page, change Owner to read as follows:

Owner: Tippah County, Mississippi

Item #2: Section 002113 – Instructions to Bidders, as follows:

Per paragraph 1.10.B add the attached Supplement "A" and "B" to this section, Contractor Qualifications.

Item #3: Section 004100 – Bid Form, as follows:

Remove existing Bid Form and replace with the attached revised Bid Form. (Changed owners name to read Tippah County, Mississippi)

Item #4: Section 011000, Summary Of Work, change paragraph 1.01.B to read as follows:

B. Owner's Name: Tippah County, Mississippi.

Item #5: Section 01100, Summary Of Work, add paragraph 1.10.K to read as follows:

K. Time Restrictions
   1. Limit conduct of especially noisy exterior work (driving piling wall, etc.) to the hours of 8:00 a.m. and 5:00 p.m. Monday thru Saturday. No noisy exterior work allowed on Sunday.

Item #6: Section 012100, Allowances, add paragraph 1.04.I to read as follows:

I. City of Ripley Building Permit. Include the stipulated sum of $30,000 for use in acquiring building permit.

Item #7: Section 075400, Thermoplastic Membrane Roofing, as follows:

Remove existing specification section 0075400 and replace with the attached revised section. NOTE: Insulation to be mechanically attached to metal deck. TPO membrane to be fully adhered. Deck sheathing and cover board not required.

Item #8: Section 097800, Interior Wall Paneling, Paragraph 2.02A, remove and replace with the following:

A. FRP wall panel system with manufacturer's standard scratch-resistant, UV-resistant protective coating.

Item #9: Section 122440, Roller Shades, change paragraph 2.02A and 2.4 to read as follows:

4) Motorized shades to be installed at Classroom 121 and Rehab 950.

Item #10: Section 122440, Roller Shades, change paragraph 2.03.B to read as follows:

B. Manual shades to be installed at all exterior window locations not noted to be provided with motorized shades. (See 2.02.4.2.4) (no shades required on interior windows)

Architectural Drawings:

Item #1: Sheet G001 – Index, as follows:

Replace this sheet in its entirety.

Item #2: Sheet G002 – Existing Site Plan – Limits Of Construction, as follows:

Replace this sheet in its entirety. NOTE: Clarifies location of secure gate.

Item #3: Sheets A101A, A101.1 – Floor Plan Enlargements, as follows:

Replace these sheets in their entirety. Note: Adds oxygen outlets to Rooms 128 and 133.

Item #4: Sheet A101.6, Floor Plan Part "6":

Replace this sheet in its entirety.

Item #5: Sheets A201, A202, A203 – Exterior Elevations, as follows:

Replace these sheets in their entirety. Note: Clarifies metal panel pattern.

Item #6: Sheet A402 –Concrete Pattern At Entrances, as follows:

Add sheet in its entirety.

Item #7: Sheets A901, A901A, A901C, A901.1, A901.6 – Interior Finishes, as follows:

Replace sheets in their entirety.

Geotechnical/Retaining Wall:

SEE ATTACHED RETAINING WALL ITEMS PROVIDED BY PRECISION ENGINEERING CORPORATION Dated January 8, 2020.

Civil:

SEE ATTACHED CIVIL ITEMS PROVIDED BY McMASTER & ASSOCIATES Dated January 8, 2020.

Structural

SEE ATTACHED STRUCTURAL ITEMS PROVIDED BY SPENCER ENGINEERS Dated January 8, 2020.

Mechanical:

SEE ATTACHED MECHANICAL ITEMS PROVIDED BY GSK Dated January 8, 2020.

Electrical:

SEE ATTACHED ELECTRICAL ITEMS PROVIDED BY JON D. RICE & ASSOCIATES, LLC Dated January 8, 2020.

END OF ADDENDUM NUMBER THREE (3)

Dean and **Dean/Associates**
architects p.a.

Kenneth A. Oubre, AIA, Vice President

PLEASE ATTACH THIS ADDENDUM TO THE INSIDE FRONT COVER OF EACH SET OF SPECIFICATIONS.

PRE-BID CONFERENCE
MEETING ATTENDEES

PROJECT NAME	OWNER REFERENCE NUMBER:	DD/A PN:	DATE:
Tippah County Hospital		18015	January 6, 2019

Name/Title	Entity	Telephone	E-Mail
JEFF HAUK	ADD CONTRACTING	(205) 795-3927	JHAUK@ADDCONTRACTING.COM
DEMPS BANNERMAN	CRITICAL POWER SYSTEMS	662-401-6831	demps@criticalpowersystemsinc.tech
Annette Bannerman	Critical Power Systems	662-322-0461	annette@criticalpowersystemsinc.tech
Tanner Wallace	FL Crane & Sons	662-862-2172	tanner.wallace@flcrane.com
John Oakes	HODGES CONSTRUCTION	662-871-3418	JOHNOAKES.HODGESCONSTION@GMAIL.COM
Chad Rankin	Hodges Construction	662-871-0082	CRANKIN0853@gmail.com
John Mauney	JESCO	662-862-3121	jmauney57@gmail.com
DAVID HORTON	CENTURY Const	662-587-3662	rd.horton@centurycg.com
Dylan Shook	Century	662-687-1747	dshook@centurycg.com
GREG WALL	JESCO INC.	662-862-3121	gregw@jescoinc.net
STEVEN STAUB	JESCO, INC	662-862-3121	stavens@jescoinc.net
Kenny Hill	XCAVATORS, INC	662-887-1795	Kenny@Xcavators-inc.com
PATRICK CHAPMAN	TCH		
SCOTT ODOM	TCH		
TABITHA CLIFTON	TCH		

Dean and Dean/Associates architects
a professional association
DEAN·GEDDIE·GRANT·OUBRE

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4400 OLD CANTON ROAD • SUITE 200 • JACKSON, MS • 39211-5922 • FAX: 601.939.3420 • WEB:www.deandean.com

PRE-BID CONFERENCE
MEETING ATTENDEES

PROJECT NAME	OWNER REFERENCE NUMBER:	DD/A PN:	DATE:
Tippah County Hospital		18015	January 6, 2019

Name/Title	Entity	Telephone	E-Mail
KENNETH OUBRE	DEAN & DEAN	(601-939-7717	KOUBRE@DEANDEAN.COM
BRIAN ATKINS	Mallett Const.	(601 858-1419	[illegible]
Bradley Cheek	Century Construction	662-823-8835	bradley@centurycg.com
Laura Tinsley	Century Construction	(662)823-5168	laura@centurycg.com
John Shows	Roy Anderson Corp	(601)5634753	John.shows@rac.com
Rick Medlin	Roy Anderson Corp	228-297-9161	rick.medlin@rac.com
Chris Chambers	Tri-Star Co.	(662-578-4445	Chris@tristar.cc
Mark Lewis	Southern Masonry	(601-946-6750	MARK@SOUTHERNDRYWALL.NET
Alex Jones	Roberts Builders Inc	662-837-7835	alex@robertsbuilders inc.com
Casey Roberts	Roberts Builders Inc	662-837-7835	casey@robertsbuilders inc.com
Pat Goolsby	B+B Concrete	(662-837-3221	Pgoolsby@bbconcrete.com
MARK JARRETT	B&B CONCRETE	662-842-6312	mjarrett@bbconcrete.com
William McCullough	Murphy & Sons Inc	662-393-3130	rminton@murphyandsons.com
Cecil Mason	Flagstar Construction	662-200-2564	cecil@Flagstarconstruction.com
Mike Parker	Flagstar Construction	662-213-4619	mikeparker@flagstarconstruction.com
Mac Hill	Zellner Construction	901-774-1100	MHILL@ZELLNERCONSTRUCTION.COM

PRE-BID CONFERENCE
MEETING ATTENDEES

PROJECT NAME	OWNER REFERENCE NUMBER:	DD/A PN:	DATE:
Tippah County Hospital		18015	January 6, 2019

Name/Title	Entity	Telephone	E-Mail
Jay Knowles Pres	Knowles Const Inc	228 669-3244	KCI0801@AOL.com
Daniel Boudreaux	" "	228 297-1647	dboud888@att.net
Chris Tuttle	UNITED ENGINES	918-704-6001	CTuttle@UNITedEngines.com
Lee Hutcherson	AZ Lightning Protection	9015531210	lee@azlightning.net
Landon Caldwell	B & B Concrete	(662) 212-3817	lcaldwell@bbconcrete.com
Buddy Ayers	Ayers Construction	662 286 9888	BUDDYAYERS@BELLSOUTH.NET
Buz Platico	Buz Platico Dozing	662-287-4221	BPlatico@frontier.com
Danny McAlister	Xcavators Inc	662-837-1843	dannymac@xcavators-inc.com
Caleb McAlister	Xcavators Inc. Falkner MS	662-512-1254	caleb@xcavators-inc.com
Chris Whitehead	Maloney Glass + Door	662-844-4540	cwhitehead@maloneyglassanddoor.com
Randle Boyd	J.M. Duncan Const.	662-882-3231	rboyd.jmd@yahoo.com

AIA® Document A305™ – 1986

Contractor's Qualification Statement

The Undersigned certifies under oath that the information provided herein is true and sufficiently complete so as not to be misleading.

SUBMITTED TO:

ADDRESS:

SUBMITTED BY:

NAME:

ADDRESS:

PRINCIPAL OFFICE:

[ ] Corporation
[ ] Partnership
[ ] Individual
[ ] Joint Venture
[ ] Other

NAME OF PROJECT: *(if applicable)* test

TYPE OF WORK: *(file separate form for each Classification of Work)*

[ ] General Construction
[ ] HVAC
[ ] Electrical
[ ] Plumbing
[ ] Other: *(Specify)*

§ 1 ORGANIZATION

§ 1.1 How many years has your organization been in business as a Contractor?

§ 1.2 How many years has your organization been in business under its present business name?

§ 1.2.1 Under what other or former names has your organization operated?

§ 1.3 If your organization is a corporation, answer the following:
§ 1.3.1 Date of incorporation:
§ 1.3.2 State of incorporation:

ADDITIONS AND DELETIONS:
The author of this document has added information needed for its completion. The author may also have revised the text of the original AIA standard form. An *Additions and Deletions Report* that notes added information as well as revisions to the standard form text is available from the author and should be reviewed. A vertical line in the left margin of this document indicates where the author has added necessary information and where the author has added to or deleted from the original AIA text.

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

This form is approved and recommended by the American Institute of Architects (AIA) and The Associated General Contractors of America (AGC) for use in evaluating the qualifications of contractors. No endorsement of the submitting party or verification of the information is made by AIA or AGC.

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User Notes: (1786072632)

§ 1.3.3 President's name:
§ 1.3.4 Vice-president's name(s)

§ 1.3.5 Secretary's name:
§ 1.3.6 Treasurer's name:

§ 1.4 If your organization is a partnership, answer the following:
§ 1.4.1 Date of organization:
§ 1.4.2 Type of partnership (if applicable):
§ 1.4.3 Name(s) of general partner(s)

§ 1.5 If your organization is individually owned, answer the following:
§ 1.5.1 Date of organization:
§ 1.5.2 Name of owner:

§ 1.6 If the form of your organization is other than those listed above, describe it and name the principals:

§ 2 LICENSING

§ 2.1 List jurisdictions and trade categories in which your organization is legally qualified to do business, and indicate registration or license numbers, if applicable.

§ 2.2 List jurisdictions in which your organization's partnership or trade name is filed.

§ 3 EXPERIENCE

§ 3.1 List the categories of work that your organization normally performs with its own forces.

§ 3.2 Claims and Suits. (If the answer to any of the questions below is yes, please attach details.)
§ 3.2.1 Has your organization ever failed to complete any work awarded to it?

§ 3.2.2 Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or its officers?

§ 3.2.3 Has your organization filed any law suits or requested arbitration with regard to construction contracts within the last five years?

§ 3.3 Within the last five years, has any officer or principal of your organization ever been an officer or principal of another organization when it failed to complete a construction contract? (If the answer is yes, please attach details.)

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User Notes: (1786072632)

§ 3.4 On a separate sheet, list major construction projects your organization has in progress, giving the name of project, owner, architect, contract amount, percent complete and scheduled completion date.

§ 3.4.1 State total worth of work in progress and under contract:

§ 3.5 On a separate sheet, list the major projects your organization has completed in the past five years, giving the name of project, owner, architect, contract amount, date of completion and percentage of the cost of the work performed with your own forces.

§ 3.5.1 State average annual amount of construction work performed during the past five years:

§ 3.6 On a separate sheet, list the construction experience and present commitments of the key individuals of your organization.

§ 4 REFERENCES

§ 4.1 Trade References:

§ 4.2 Bank References:

§ 4.3 Surety:

§ 4.3.1 Name of bonding company:

§ 4.3.2 Name and address of agent:

§ 5 FINANCING

§ 5.1 Financial Statement.

§ 5.1.1 Attach a financial statement, preferably audited, including your organization's latest balance sheet and income statement showing the following items:

Current Assets (e.g., cash, joint venture accounts, accounts receivable, notes receivable, accrued income, deposits, materials inventory and prepaid expenses);

Net Fixed Assets;

Other Assets;

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Current Liabilities (e.g., accounts payable, notes payable, accrued expenses, provision for income taxes, advances, accrued salaries and accrued payroll taxes);

Other Liabilities (e.g., capital, capital stock, authorized and outstanding shares par values, earned surplus and retained earnings).

§ 5.1.2 Name and address of firm preparing attached financial statement, and date thereof:

§ 5.1.3 Is the attached financial statement for the identical organization named on page one?

§ 5.1.4 If not, explain the relationship and financial responsibility of the organization whose financial statement is provided (e.g., parent-subsidiary).

§ 5.2 Will the organization whose financial statement is attached act as guarantor of the contract for construction?

§ 6 SIGNATURE

§ 6.1 Dated at this day of

Name of Organization:

By:

Title:

§ 6.2

M being duly sworn deposes and says that the information provided herein is true and sufficiently complete so as not to be misleading.

Subscribed and sworn before me this day of

Notary Public:

My Commission Expires:

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SUPPLEMENT "B"

SECTION 002113 – INSTRUCTIONS TO BIDDERS

Tippah County Hospital
Bidder Investigation
Architect's Project Number: 18015

Pursuant to Section 002113, Paragraph 1.10 Contract, of the Instructions to Bidders, and as requested by Tippah County, we are conducting an investigation of the three lowest bidders' experience and ability to perform a project of this size and complexity.

To facilitate this investigation, we request the following information:

1. Detailed information relative to your company's relevant **healthcare** construction experience, focusing on representative **hospital** projects of similar or greater size, scope and complexity.

2. Names, addresses and telephone numbers of individuals who can comment on your company's performance on the projects listed.

3. A list of all projects performed for the Tippah County Hospital in the past, and for each project, state whether there were any disagreements as to timeliness and quality of performance by your company and, if so, how those disagreements were resolved.

4. Whether your company is in arrears on any existing contracts, and, if so, please explain.

5. Whether your company is in any current litigation with a project owner, and, if so, please explain.

6. Whether your company has ever failed to compete a project or any warranty obligation on the project, and, if so, please explain.

7. List of subcontractors, suppliers and manufacturers used by the Bidder in his bid, for each bid, quote or potential contract that will exceed $100,000.

8. The project team proposed by the General Contractor including but not limited to principal in charge, senior project manager, project manager and superintendent (including names and relative qualifications for all personnel).

SECTION 004100

BID FORM

THE PROJECT AND THE PARTIES

1.01 TO:

A. Owner
   1. Tippah County, Mississippi
      Ripley, MS 38663

1.02 FOR:

A. Replacement Facility for: Tippah County Hospital - 1005 City Avenue North - Ripley, MS 38663

1.03 DATE: _____ (BIDDER TO ENTER DATE)

1.04 SUBMITTED BY: (BIDDER TO ENTER NAME AND ADDRESS)

A. Bidder's Full Name _____
   Address _____
   City, State, Zip_____

1.05 OFFER

A. Having examined the Place of The Work and all matters referred to in the Instructions to Bidders and the Contract Documents prepared by Dean and Dean/Associates Architects for the above mentioned project, we, the undersigned, hereby offer to enter into a Contract to perform the Work for the Sum of:

B. **Base Bid** _____
_____ dollars
($_____), in lawful money of the United States of America.

C. **Alternate #1 (Add) - (price to provide existing site utility relocations as shown on Civil Drawings)**
_____
_____ dollars
($_____), in lawful money of the United States of America.

D. **Alternate #2 (Add) - (price to provide material and labor to install roof top equipment screen walls)** _____
dollars ($_____), in lawful money of the United States of America.

E. We have included the required performance assurance bonds in the Bid Amount as required by the Instructions to Bidders.

F. All applicable federal taxes are included and State of Mississippi taxes are included in the Bid Sum.

G. All Cash Allowances described in Section 012100 are included in the Bid Sum.

1.06 ACCEPTANCE

A. This offer shall be open to acceptance and is irrevocable for sixty days from the bid closing date.

B. If this bid is accepted by Owner within the time period stated above, we will:
   1. Execute the Agreement within seven days of receipt of Notice of Award.
   2. Furnish the required bonds within seven days of receipt of Notice of Award.

C. If this bid is accepted within the time stated, and we fail to commence the Work or we fail to provide the required Bond(s), the security deposit shall be forfeited as damages to Owner by reason of our failure, limited in amount to the lesser of the face value of the security deposit or the difference between this bid and the bid upon which a Contract is signed.

D. In the event our bid is not accepted within the time stated above, the required security deposit shall be returned to the undersigned, in accordance with the provisions of the Instructions to

Bidders; unless a mutually satisfactory arrangement is made for its retention and validity for an extended period of time.

1.07 CONTRACT TIME

A. If this Bid is accepted, we will:

Complete the Work in ____ calendar days from Notice to Proceed. (Bidder to enter number of calender days to complete project)

1.08 UNIT PRICES

A. The following Unit Prices will apply to authorized items added or removed from the Work as shown on the drawings. These unit prices shall remain fixed throughout the length of the contract from the date of the signatures of the contract between the Owner and the Contractor. During this period, the Owner shall have the option to execute change orders to the Contract for Construction for any or all of the items listed below in the quantities selected and at the unit prices so stated.

1. While providing the required overexcavation and backfilling of the site per the Civil drawings the Contractor shall provide a per yard unit price for **any additional** unsuitable, pumping / yielding material to be excavated,removed from the site and replaced with Select fill material meeting the requirements of the specifications. If the GC finds that suitable material is in-place in areas called to be overexcavated and backfilled the unit price per yard shall be deducted from the base bid price.
    a. Add / Deduct $_____ per cubic yard. Includes excavation, removal from site and haul-in and placement of Imported Select Fill.

2.01 ADDENDA

A. The following Addenda have been received. The modifications to the Bid Documents noted below have been considered and all costs are included in the Bid Sum.

1. Addendum # _____ Dated _____.
2. Addendum # _____ Dated _____.
3. Addendum # _____ Dated _____.
4. Addendum # _____ Dated _____.

2.02 BID FORM SUPPLEMENTS

A. The following information is included with Bid submission:
    1. Subcontractors: Mechanical, Electrical, Plumbing.

B. The following Supplements are attached to this Bid Form and are considered an integral part of this Bid Form:
    1. Document 004336 - Proposed Subcontractor Form : Include the names of the listed Subcontractors.

2.03 BID FORM SIGNATURE(S)

A. The Corporate Seal of

_____

(Bidder - print the full name of your firm)

was hereunto affixed in the presence of:

_____

(Authorized signing officer, Title)

B. If the Bid is a joint venture or partnership, add additional forms of execution for each member of the joint venture in the appropriate form or forms as above.

2.04 RESIDENT BIDDER (CHECK APPROPRIATE LINE)

THE BIDDER IS A RESIDENT _____

THE BIDDER IS A NON-RESIDENT _____

OF THE STATE OF MISSISSIPPI.

TELEPHONE NUMBER : _____

EMAIL : _____

END OF BID FORM

SECTION 075400

THERMOPLASTIC MEMBRANE ROOFING

PART 1 GENERAL

1.01 SECTION INCLUDES

A. Adhered system with thermoplastic roofing membrane (60 Mil).

B. Insulation, flat and tapered.

C. Roofing stack boots.

1.02 RELATED REQUIREMENTS

A. Section 061000 - Rough Carpentry: Wood nailers and curbs.

B. Section 076200 - Sheet Metal Flashing and Trim: Counterflashings.

C. Section 077100 - Roof Specialties

D. Section 077123- Manufactured Gutters and Downspouts

1.03 REFERENCE STANDARDS

A. ASTM C1289 - Standard Specification for Faced Rigid Cellular Polyisocyanurate Thermal Insulation Board; 2014.

B. ASTM D6878/D6878M - Standard Specification for Thermoplastic Polyolefin Based Sheet Roofing; 2013.

C. ASTM E96/E96M - Standard Test Methods for Water Vapor Transmission of Materials; 2014.

D. FM (AG) - FM Approval Guide; current edition.

E. FM DS 1-28 - Wind Design; 2007.

F. NRCA ML104 - The NRCA Roofing and Waterproofing Manual; National Roofing Contractors Association; Fifth Edition, with interim updates.

G. UL (DIR) - Online Certifications Directory; current listings at database.ul.com.

H. UL (FRD) - Fire Resistance Directory; current edition.

1.04 SUBMITTALS

A. See Section 013000 - Administrative Requirements, for submittal procedures.

B. Product Data: Provide data indicating membrane materials, flashing materials, insulation, and fasteners.

C. Specimen Warranty: For approval.

D. Manufacturer's Installation Instructions: Indicate membrane seaming precautions and perimeter conditions requiring special attention.

E. Manufacturer's Certificate: Certify that products meet or exceed specified requirements.

F. Manufacturer's Field Reports: Indicate procedures followed, ambient temperatures, humidity, wind velocity during application, and supplementary instructions given.

G. Warranty:
   1. Submit manufacturer warranty and ensure that forms have been completed in Owner's name and registered with manufacturer.
   2. Submit installer's certification that installation complies with all warranty conditions for the waterproof membrane.

H. Warranty: Submit manufacturer warranty and ensure forms have been completed in Owner's name and registered with manufacturer.

1.05 QUALITY ASSURANCE

A. Perform work in accordance with NRCA Roofing and Waterproofing Manual.

B. Installer Qualifications: Company specializing in performing the work of this section:
   1. With minimum 5 years documented experience.

2. Approved by membrane manufacturer.

1.06 PRE-INSTALLATION MEETING

A. Convene one week before starting work of this section.

B. Review preparation and installation procedures and coordinating and scheduling required with related work.

1.07 DELIVERY, STORAGE, AND HANDLING

A. Deliver products in manufacturer's original containers, dry, undamaged, with seals and labels intact.

B. Store products in weather protected environment, clear of ground and moisture.

C. Ensure storage and staging of materials does not exceed static and dynamic load-bearing capacities of roof decking.

D. Protect foam insulation from direct exposure to sunlight.

1.08 WARRANTY

A. System Warranty: Provide manufacturer's system warranty agreeing to repair or replace roofing that leaks or is damaged due to wind or other natural causes.
   1. Warranty Term: 20 years.
   2. For repair and replacement include costs of both material and labor in warranty.

PART 2 PRODUCTS

2.01 MANUFACTURERS

A. Thermoplastic Polyolefin Membrane Materials:
   1. Carlisle SynTec: www.carlisle-syntec.com.
   2. Firestone Building Products, LLCwww.firestonebpco.com.
   3. GAF; EverGuard TPO 60 mil: www.gaf.com/#sle.
   4. GenFlex Roofing Systems, LLC: www.genflex.com/#sle.
   5. Substitutions: See Section 016000 - PRODUCT REQUIREMENTS.

B. Insulation:
   1. GAF Materials Corporation: www.gaf.com.
   2. Dow Chemical Co: www.dow.com.
   3. Owens Corning Corporation: www.ocbuildingspec.com/#sle.
   4. Substitutions: See Section 016000 - PRODUCT REQUIREMENTS.

2.02 ROOFING - UNBALLASTED APPLICATIONS

A. Thermoplastic Membrane Roofing: One ply membrane, fully adhered, over insulation.

B. Roofing Assembly Requirements:
   1. Factory Mutual Classification: Class I and windstorm resistance of I-90, in accordance with FM DS 1-28.

C. Acceptable Insulation Types - Tapered Application: Any of the types specified.
   1. Tapered polyisocyanurate, perlite, or extruded polystyrene board.
   2. Uniform thickness cellulose, perlite, composite, polyisocyanurate, extruded polystyrene, molded polystyrene, glass fiber, or cellular glass board covered with tapered polyisocyanurate, extruded polystyrene, or perlite board.

2.03 ROOFING MEMBRANE AND ASSOCIATED MATERIALS

A. Membrane:
   1. TPO: Thermoplastic polyolefin (TPO) complying with ASTM D6878/D6878M, sheet contains reinforcing fabrics or scrims.
   2. Reinforcing: Internal fabric.
   3. Thickness:.060 inch, minimum. 60 mil.
   4. Sheet Width: Factory fabricated into largest sheets possible.
   5. Color: Gray.

6. Provide 24"x24" walk pads as noted in drawings.
7. Color: Gray.

B. Seaming Materials: As recommended by membrane manufacturer.

C. Flexible Flashing Material: Same material as membrane.

2.04 INSULATION

A. Polyisocyanurate Board Insulation: Rigid cellular foam, complying with ASTM C1289, Type II, Class 1, cellulose felt or glass fiber mat both faces; Grade 2 and with the following characteristics:
1. Compressive Strength: 20 psi
2. Board Size: 48 x 96 inch.
3. Board Thickness: 2 inch minimum at roof drains. see details on drawings for roof drain sump areas.
4. Thermal Resistance: R-value of 23.6 Minimum.
5. Board Edges: Square.
6. Board thickness: 4" minimum.
7. Mechanically attached to metal roof deck per manufacturer's recomendations.
8. Manufacturers:
   a. Atlas Roofing Corporation: www.atlasroofing.com.
   b. Dow Chemical Co: www.dow.com.
   c. GAF: www.gaf.com.

2.05 ACCESSORIES

A. Stack Boots: Prefabricated flexible boot and collar for pipe stacks through membrane; same material as membrane.

B. Insulation Joint Tape: Glass fiber reinforced type as recommended by insulation manufacturer, compatible with roofing materials; 6 inches wide; self adhering.

C. Insulation Fasteners: Appropriate for purpose intended and approved by roofing manufacturer.

D. Membrane Adhesive: As recommended by membrane manufacturer.

E. Surface Conditioner for Adhesives: Compatible with membrane and adhesives.

F. Thinners and Cleaners: As recommended by adhesive manufacturer, compatible with membrane.

G. Insulation Adhesive: As recommended by insulation manufacturer.

H. Sealants: As recommended by membrane manufacturer.

I. Termination Bars:
1. Type 1: T-1 termination bar by Hohmann & Barnard, Inc.
   a. Material: Type 304 Stainless steel compatible with roofing membrane
   b. Size: 1/8" x 1" x 8ft lengths with 1/4" holes spaced 8" o.c.
   c. Locations: As indicated on drawings.
2. Type 2: T-2 termination bar with caulking flange by Hohmann & Barnard, Inc.
   a. Material: Type 304 Stainless steel compatible with roofing membrane
   b. Size: 1" x 8ft lengths with 1/4" holes spaced 8" o.c.
   c. Locations: As indicated on drawings.

PART 3 EXECUTION

3.01 INSTALLATION - GENERAL

A. Perform work in accordance with NRCA Roofing and Waterproofing Manual and manufacturer's instructions.

B. Do not apply roofing membrane during unsuitable weather.

C. Do not apply roofing membrane when ambient temperature is outside the temperature range recommended by manufacturer.

D. Do not apply roofing membrane to damp or frozen deck surface or when precipitation is expected or occurring.

E. Do not expose materials vulnerable to water or sun damage in quantities greater than can be weatherproofed the same day.

3.02 EXAMINATION

A. Verify that surfaces and site conditions are ready to receive work.

B. Verify deck is supported and secure.

C. Verify deck is clean and smooth, flat, free of depressions, waves, or projections, properly sloped and suitable for installation of roof system.

D. Verify deck surfaces are dry and free of snow or ice.

E. Verify that roof openings, curbs, and penetrations through roof are solidly set, and cant strips are in place.

3.03 INSULATION - UNDER MEMBRANE

A. Attachment of Insulation:
   1. Mechanically fasten insulation to deck in accordance with roofing manufacturer's instructions and FM (AG) Factory Mutual requirements.

B. Place tapered insulation to the required slope pattern in accordance with manufacturer's instructions.

C. On metal deck, place boards parallel to flutes with insulation board edges bearing on deck flutes.

D. Lay boards with edges in moderate contact without forcing. Cut insulation to fit neatly to perimeter blocking and around penetrations through roof.

E. Tape joints of insulation in accordance with roofing and insulation manufacturers' instructions.

F. At roof drains, use factory-tapered boards to slope down to roof drains over a distance of 18 inches.

G. Do not apply more insulation than can be covered with membrane in same day.

3.04 MEMBRANE APPLICATION

A. Roll out membrane, free from wrinkles or tears. Place sheet into place without stretching.

B. Shingle joints on sloped substrate in direction of drainage.

C. Fully Adhered Application: Apply adhesive to substrate at rate recommended by the manufacturer to suit application . Fully embed membrane in adhesive except in areas directly over or within 3 inches of expansion joints. Fully adhere one roll before proceeding to adjacent rolls.

D. Overlap edges and ends and seal seams by contact adhesive, minimum 3 inches. Seal permanently waterproof. Apply uniform bead of sealant to joint edge.

E. At intersections with vertical surfaces:
   1. Extend membrane over cant strips and up a minimum of 4 inches onto vertical surfaces.
   2. Fully adhere flexible flashing over membrane and up to nailing strips.

F. Around roof penetrations, seal flanges and flashings with flexible flashing.

3.05 FIELD QUALITY CONTROL

A. See Section 014000 - QUALITY REQUIREMENTS, for general requirements for field quality control and inspection.

B. Require site attendance of roofing and insulation material manufacturers daily during installation of the Work.

3.06 CLEANING

A. Remove bituminous markings from finished surfaces.

B. In areas where finished surfaces are soiled by work of this section, consult manufacturer of surfaces for cleaning advice and conform to their documented instructions.

C. Repair or replace defaced or damaged finishes caused by work of this section.

3.07 PROTECTION

A. Protect installed roofing and flashings from construction operations.

B. Where traffic must continue over finished roof membrane, protect surfaces using durable materials.

END OF SECTION

Geotechnical Engineering
Hydraulic Engineering
Civil Engineering
Surveying

276 County Road 101
Oxford, MS 38655
oxford@pecorpms.com

PRECISION ENGINEERING CORPORATION
EST. 1976

Land Planning/Subdivisions
Road and Bridge Design
Utility System Design
Materials Testing

Phone 662-234-8539
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www.pecorpms.com

January 8, 2020

ADDENDUM NO. THREE (3) – SHEET PILE WALL ITEMS
Replacement Facility for Tippah County Hospital
Ripley, Mississippi
Precision Engineering Corporation

Plan Holders,

The following changes and clarifications are hereby made a part of and take precedence over conflicting sections of the Drawings and Specifications.

GENERAL INFORMATION AND CLARIFICATIONS:

1.1 Sheet 7.1 Specification 1. shall include ESZ 26-700 Grade 60 sheet pile as an approved equivalent.

END OF SHEET PILE WALL ITEMS FOR ADDENDUM NO. THREE (3)

McMASTER & ASSOCIATES, INC.
CIVIL ENGINEERS & LAND SURVEYORS

January 8, 2019

ADDENDUM NO. THREE (3) – CIVIL ENGINEERING ITEMS
Replacement Facility for Tippah County Hospital
Ripley, Mississippi
McMaster & Associates, Inc. – M-2696

The following changes and clarifications are hereby made a part of and take precedence over conflicting sections of the Drawings and Specifications.

CIVIL GENERAL INFORMATION AND CLARIFICATIONS:

1.1 Item #1 - Enclosed is revised C5.2-'Plan & Profile – Retaining Wall' showing a 48" black coated chain link fence that is required.

1.2 Item #2 - Enclosed is revised C6.5-'Water Details' showing several edits to the notes and schedule for the Water Meter and Vault Details.

END OF CIVL ITEMS FOR ADDENDUM NO. THREE (3)

212 WATERFORD SQUARE | SUITE 300 | MADISON, MS 39110
PHONE: 601.605.1090 | FAX: 601.605.1091

JANUARY 8, 2020

REPLACEMENT FACILITY FOR
TIPPAH CO. HOSPITAL
RIPLEY, MISSISSIPPI

STRUCTURAL ADDENDUM #3

Item No. 1 Ref. Sheet S104 – Delete sheet in its entirety and replace with revised attached sheet S104.

Item No. 2 Ref. Sheet S105 – Delete sheet in its entirety and replace with revised attached sheet S105.

Item No. 3 Ref. Sheet S301 – Delete sheet in its entirety and replace with revised attached sheet S301.

Item No. 4 Ref. Sheet S305 – Delete sheet in its entirety and replace with revised attached sheet S305.

Spencer-Engineers, Inc./Consultants
2508 Lakeland Drive, Suite 200, Flowood, MS 39232
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(601) 982-7766

201 Park Court, Suite A
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www.gskmech.com

GSK MECHANICAL

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL

A. Mechanical Specifications

1. Section 230680 WATER CHILLERS- paragraph 1.3.B. Delete the words "and/or witness" from the first sentence.

B. Mechanical Drawings

1. Sheet P101 – Drawing Index. Added new sheet P201.6 - Enlarged Medical Gas Plan – Part "6" to the Drawing Index.

2. Sheet P201 – Overall Medical Gas Plan. Delete sheet in its entirety and replace with revised sheet attached. Added callout to reference new sheet P201.6 – Enlarged Medical Gas Plan – Part "6".

3. Sheet P201.4 – Enlarged Medical Gas Plan – Part "4". Delete sheet in its entirety and replace with revised sheet attached. Changed size of oxygen piping in rooms 401/404.

4. Sheet P201.5 – Enlarged Medical Gas Plan – Part "5". Delete sheet in its entirety and replace with revised sheet attached. Changed size of oxygen piping in "Corridor 005".

5. Sheet P201.6 – Enlarged Medical Gas Plan – Part "6". Add new sheet P201.6 (attached). Added additional oxygen piping and wall outlets.

6. Sheet M101.6A - Enlarged HVAC Plan Part "6A". Add fire damper designation "AFD" to fire damper for Room 509 & 510.

END OF MECHANICAL ITEMS FOR ADDENDUM

Jon D. Rice & Associates, LLC

Electrical Engineering Consultants
5403 Castlewoods Court · Suite G · Flowood, MS · 39232
Tel: 601-919-8040 Fax: 601-919-8060

January 8, 2020

Dean & Dean Architects
Attn: Kenny Oubre/Brad Heath
P.O. Box 4685
Jackson, MS 39216

Re: Replacement Facility for Tippah County Hospital – Addendum #3 (Electrical)

Electrical addendum items are as follows:

Sheet E001

1. Additional information has been provided for the Intercom Station Rough-in.

2. An Intercom Master Station Rough-in has been added to the legend.

Sheet E002

3. Panel names have been changed to reflect the names of the panels on the schedules.

4. Panel H1NB has been added.

5. L2CRB has been added.

6. A general note has been added to indicate the Type Surge Protection Device, and feeder to the Surge Protection Devices for each panel.

Sheet E003

1. Modifications have been made to the light fixture schedule.

2. Two Type SL31 Fixtures shall have a 28' pole and the pole base shall be 3" above finished grade. See Sheet E101 for these pole locations.

Sheet E005

1. Modifications have been made to Switchboard SWBD, Panel EDP, Panel HLSDP, and Panel HCRDP.

Sheet E006

1. Add sub feed lugs to panel L3NA.
2. Circuits have been added to Panels L2NC, and L1EQA.

Sheet E101

1. Electrical requirements have been added to the Oxygen Storage Yard.
2. The existing sign in front of the existing hospital shall be relocated to the new Entrance Drive.
3. A new internally illuminated sign has been added to the site.
4. Two pole lights (Type SL31) at the front entry shall have 3" tall base, above finished grade. Poles shall be 28' in height.

Sheet E201A

1. The Type "A" lights in the Kitchen area shall be type "Y" light fixtures.
2. The circuits to the canopy lighting and wall sconces on the East side of the facility have been modified to include emergency lighting.

Sheet E201B

1. The circuit to the down light at the south entry to the Patient Wing has been modified to be connected to emergency lighting.

Sheet E201C

1. The circuits to the light fixtures at the Emergency Department, and Rural Health Clinic entrance canopies have been modified to include emergency lighting.
2. A life safety circuit has been added to a light in Corridor 1101.

Sheet E201D

1. The Ambulance Canopy circuits and Loading Dock circuits have been modified to have life safety circuits for egress.

2. The light in OR 621 shall have three drivers, one of which controls a green color light in the fixture. An additional dimmer has been added for control of the green lights.

3. The light in Scope Clean Room 624, has changed to a type "Y" fixture.

If you have any questions regarding this addendum, please call.

Thank you,

Michael Layman

ARCHITECTURAL ABBREVIATIONS

&	AND
@	AT
A/C	AIR CONDITIONING
ACOUS.	ACOUSTICAL
A.D.	AREA DRAIN
ADJ.	ADJUSTABLE
A/E	ARCHITECT/ENGINEER
A.F.F.	ABOVE FINISHED FLOOR
A.H.U.	AIR HANDLING UNIT
A.T.	ACOUSTICAL TILE
ALT.	ALTERNATE
ALUM./AL.	ALUMINUM
A.P.C.	ARCHITECTURAL PRECAST CONCRETE
A.P.	ACCESS PANEL
APPROX.	APPROXIMATE
ARCH.	ARCHITECTURAL
ASB.	ASBESTOS
ASPH.	ASPHALT
ATTEN.	ATTENUATION
A.V.	AUDIO VISUAL
BD.	BOARD
BIT.	BITUMINOUS
BLDG.	BUILDING
BLK./BLKG.	BLOCKING
BOT.	BOTTOM
B.R.	BUMPER RAIL
[OR CH.	CHANNEL
CAB.	CABINET
C.B.	CATCH BASIN
CER.	CERAMIC
CFCI	CONTRACTOR FURNISHED / CONTRACTOR INSTALLED
C.G.	CORNER GAURD
CH.BD.	CHALK BOARD
C.J.	CONTROL JOINT
CLG.	CEILING
℄	CENTERLINE
CLR.	CLEAR
C.M.U.	CONCRETE MASONRY UNIT
C.O.	CASED OPENING
COL.	COLUMN
CONC.	CONCRETE
CONN.	CONNECTION
CONST.	CONSTRUCTION
CONT.	CONTINUOUS
COORD.	COORDINATE
CPT.	CARPET
C.R.	CURTAIN ROD
C.T.	CERAMIC TILE
CT	CURTAIN TRACK
CTSK	COUNTERSUNK
DBL.	DOUBLE
DEPT.	DEPARTMENT
DET./DTL.	DETAIL
DIA.	DIAMETER
DIM.	DIMENSION
DIS	DISPENSER
DN.	DOWN
DP.	DAMPPROOFING
DS	DOWNSPOUT
DWGS.	DRAWINGS
E.	ELEVATOR
EA.	EACH
E.D.F.	ELECTRICAL DRINKING FOUNTAIN
E.F.	EXAUST FAN
E.I.F.S.	EXT. INSULATING FINISH SYSTEM
E.J.	EXPANSION JOINT
ELEC.	ELECTRICAL
ELEV.	ELEVATION
EL.	ELEVATION
EMER.	EMERGENCY
ENCL.	ENCLOSURE
EP.	EPOXY PAINT
E.P.	ELECTRICAL PANELBOARD
EQ.	EQUAL
EQUIP.	EQUIPMENT
EST.	EXPOSED STRUCTURE
E.W.	EACH WAY
EXH.	EXHAUST
EXP.	EXPANSION
EXPO.	EXPOSED
EXST./EXIST.	EXISTING
EXT.	EXTERIOR
F.A.P.	FIRE ALARM PANEL
F.D.	FLOOR DRAIN
FDN.	FOUNDATION
F.E.	FIRE EXTINGUISHER
F.E.C.	FIRE EXTINGUISHER CABINET
F.F.	FINISH FLOOR
F.F.E.	FINISH FLOOR ELEVATIONS
F.H.	FIRE HYDRANT
F.H.C.	FIRE HOSE CABINET
FIN.	FINISH
FL./FLR.	FLOOR
F.N.D.	FEMMANE NAPKIN DISPENSER
F.O.M.	FACE OF MASONRY
F.O.S.	FACE OF STUD
FPRF.	FIREPROOFING
F.S.	FULL SIZE
F.S.S.	FOLDING SHOWER SEAT
FT.	FOOT/FEET
FTG.	FOOTING
FURN.	FURNISHED
FURR.	FURRING
F.W.C.	FABRIC WALL COVERING
GA.	GAUGE
GALV.	GALVANIZED
G.B.	GRAB BAR
G.C.	GENERAL CONTRACTOR
GL.	GLASS
GL.BK.GND.	GLASS BLOCK GROUND
GYP.	GYPSUM
GYP.BD.	GYPSUM BOARD
H.B.	HOSE BIB
H.C.	HOLLOW CORE
HCP./HC.	HANDICAP
HCWD.	HOLLOW CORE WOOD
HDWE.	HARDWARE
HGT.	HEIGHT
H.M.	HOLLOW METAL
HORIZ.	HORIZONTAL
HR.	HOUR
H.R.	HANDRAIL
H.V.	HOMOGENEOUS VINYL
HVAC.	HEATING/VENTILATING & AIR COND.
I.D.	INSIDE DIAMETER (DIM.)
INSUL.	INSULATION
INT.	INTERIOR
INV.	INVERT
I.P.	IRON PIPE
JAN.	JANITOR
J.B.	JOIST BEARING
JT.	JOINT
L.A.T.	LAY-IN-ACOUSTICAL TILE
LAM.	LAMINATE
LAV.	LAVATORY
LBS.	POUNDS
LKR.	LOCKER
LT.	LIGHT
LT. WT.	LIGHT WEIGHT
LVR.	LOUVER
MAS.	MASONRY
MAX.	MAXIMUM
MECH.	MECHANICAL
MEMB.	MEMBRANE
MFR./MFGR.	MANUFACTURER
MH.	MANHOLE
MIN.	MINIMUM
MISC.	MISCELLANEOUS
M.O.	MASONRY OPENING
M.R.GYP.BD.	MOISTURE RESISTANT GYPSUM BOARD
MTD.	MOUNTED
MTL.	METAL
MATL.	MATERIAL
MIR.	MIRROR
MULL.	MULLION
N.	NORTH
N.A.	NOT APPLICABLE
N.I.C.	NOT IN CONTRACT
N.T.S.	NOT TO SCALE
NO. OR #	NUMBER
NOM.	NOMINAL

O.A.	OUTSIDE AREA
O.C.	ON CENTER
O.D.	OUTSIDE DIAMETER (DIM.)
OFCI	OWNER FURNISHED / CONTRACTOR INSTALLED
OFOI	OWNER FURNISHED / OWNER INSTALLED
O.H.	OPPOSITE HAND
OH.	OVERHEAD
OPNG.	OPENING
O.P.O.I.	OWNER PROVIDED/OWNER INSTALLED
OPP.	OPPOSITE
O.S.	OVERFLOW SCUPPER
PBD.	PARTICLE BOARD
PC. CONC.	PRECAST CONCRETE
P.LAM.	PLASTIC LAMINATE
P.I.P.	POURED-IN-PLACE
P.L. OR ℙ	PROPERTY LINE
PL.	PLATE
PLAS.	PLASTER
POL. /PLAM.	POLISHED
PR.	PAIR
PRE-FAB.	PRE-FABRICATED
PRE-FIN	PRE-FINISHED
P.T.	PORCELAIN TILE
P.T.D.	PAPER TOWEL DISPENSER
PTD.	PAINTED
P.T.D.D.	PAPER TOWEL DISPENSER/DISPOSAL
PTN./PARTN	PARTITION
P.T.R.	PAPER TOWEL RECEPTACLE
PVMT.	PAVEMENT
PWD./PLYWD	PLYWOOD
Q.T.	QUARRY TILE
R.	RISER
RAD.	RADIUS
R.A.G.	RETURN AIR GRILL
R.B.	RUBBER BASE
R.C.P.	REINFORCED CONCRETE PIPE
RCP	REFLECTED CEILING PLAN
REC.RECT.	RECESSED RECTANGULAR
R.D.	ROOF DRAIN
Ø OR RD.	ROUND
REF.	REFERENCE
REINF	REINFORCEMENT/REINFORCED
REFL.	REFLECTED
REQ.	REQUIRED
RESIL.	RESILIENT
R.H.	ROBE HOOK
RM.	ROOM
R.O.	ROUGH OPENING
S.	SOUTH
S.C.	SOLID CORE
SCH.	SCHEDULE
S.C.W.D.	SOLID CORE WOOD
S.D.	SOAP DISPENSER
SEC. GL.	SECURITY GLASS
SECT.	SECTION
SER.S./S.SK	SERVICE SINK
SHT.	SHEET
SHVS.	SHELVES
SHWR	SHOWER
SIM.	SIMILAR
SPEC.	SPECIFICATION
SQ.	SQUARE
SQ. FT.	SQUARE FEET
S.N.D.	SANITARY NAPKIN DISPOSAL
S.S.	STAINLESS STEEL
S.S.D.	SHOWER SOAP DISH
S.T.C.	SOUND TRANSMISSION
STD.	STANDARD
ST. DR.	STORM DRAIN
STL.	STEEL
STRUCT.	STRUCTURAL
SUSP.	SUSPENDED
S.V.	SHEET VINYL
SYM.	SYMMETRICAL
SYN.	SYNTHETIC
TR.	TREAD
T.B.	TOWEL BAR
T.C.	TOP OF CURB
TEL.	TELEPHONE
TEMP. GL.	TEMPERED GLASS
T&G	TONGUE AND GROOVE
TH./THRES.	THRESHOLD
THK.	THICK
T.P.	TOP OF PAVEMENT
T.P.H.	TOILET PAPER HOLDER
T.O.S.	TOP OF STEEL
TYP.	TYPICAL
U.H.	UNIT HEATER
U.N.O.	UNLESS NOTED OTHERWISE
U.H.	UNIT HEATER
U.P.S.	UNINTERRUPTED POWER SUPPLY
U.S.	UTILITY SHELF
V.B.	VINYL BASE
V.C.T.	VINYL COMPOSITION TILE
VERT.	VERTICAL
VOJ	VERIFY ON JOB
V.W.C.	VINYL WALL COVERING
W.	WEST
W. GL.	WIRE GLASS
W/O	WITHOUT
W.P.	WATERPROOF
WSCT.	WAINSCOT
WT./WGT.	WEIGHT
W.W.M.	WELDED WIRE MESH

ARCHITECTURAL GRAPHIC SYMBOLS

CONCRETE
ACOUSTICAL TILE
CARPET
INSULATION (BATT)
INSULATION (RIGID)
GYPSUM BOARD
METAL (SECTION)
PLYWOOD
BRICK
C.M.U. (SECTION)
PORTLAND CEMENT
FINISHED WOOD
WOOD BLOCKING
NAME 111 — ROOM NAME AND NUMBER

DOOR NUMBER
A / 2 — COLUMN GRID LINE
A — WINDOW TYPE
7 — HOLLOW METAL FRAME NUMBER
NUMBER OF SECTION
NUMBER OF SHEET
BUILDING/WALL SECTION
ELEVATION / VIEW
DETAIL
MATCHLINE

EL.= — SPOT ELEVATION / PLAN
EL.= — ELEVATION MARK / SECTION

TOILET ACCESSORY LEGEND

SYMBOL	DESCRIPTION
A1	42" GRAB BARS - INSTALL TO MEET ADA REQUIREMENTS
A2	36" GRAB BARS - INSTALL TO MEET ADA REQUIREMENTS
A3	18" GRAB BARS - INSTALL TO MEET ADA REQUIREMENTS
A4	24" GRAB BARS - INSTALL TO MEET ADA REQUIREMENTS
C	TOILET SEAT COVER DISPENSER (OFCI)
D	TOILET TISSUE DISPENSER (OFCI)
E	SOAP DISPENSER (OFCI)
F	PAPER TOWEL DISPENSER (OFCI)
G	ROBE HOOK - SEE A101 SHEET PLANS FOR LOCATIONS (ALL EXAMS, OFFICES, TOILET ROOMS)
H	SPECIMEN PASS-THROUGH CABINET (CFCI)
J	BABY CHANGING STATION (CFCI)
K	FRAMED MIRROR - 24"X36" (CFCI)
L	FRAMED MIRROR W/ SHELF - 24"X36" (CFCI)
M	18" TOWEL BAR (CFCI)
N	MOP AND BROOM HOLDER (CFCI)
P	COUNTER MOUNTED SOAP DISPENSER

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ARCHITECTURAL

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A203	EXTERIOR ELEVATIONS	ADDENDUM 3
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A205	BUILDING SECTIONS	
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M101.6A	ENLARGED HVAC PLAN - PART "6A"	
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VENDOR DRAWINGS

FS-1	KITCHEN EQUIPMENT LAYOUT
FS-2	PLUMBING ROUGH-IN LAYOUT
FS-3	ELECTRICAL ROUGH-IN LAYOUT

CIVIL - CONT'D

ADDENDUM 2

C7.0	SHEET PILE RETAINING WALL COVER SHEET
C7.1	WALL PLAN VIEW-PIPE DETAILS
C7.2	WALL PROFILE VIEW
C7.3	BORING LOGS

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- - CODE NOTES - -

- INTERNATIONAL BUILDING CODE.....2006 EDITION
- INTERNATIONAL FIRE CODE.....2006 EDITION
- INTERNATIONAL MECHANICAL CODE.....2006 EDITION
- INTERNATIONAL PLUMBING CODE.....2006 EDITION
- NATIONAL ELECTRICAL CODE.....2008 EDITION
- LIFE SAFETY CODE - NFPA 101.....2000 EDITION
- GUIDELINES FOR DESIGN AND CONSTRUCTION OF HEALTHCARE FACILITIES.....2014 EDITION
- 2010 ADA STANDARDS FOR ACCESSIBLE DESIGN
- INTERNATIONAL CODE COUNCIL/ ANSI A117.1.....2003 EDITION

■ ***USE AND OCCUPANCY CLASSIFICATION: SECTION 304***

INSTITUTIONAL:	GROUP I-2
BUILDING PHYSICAL PROPERTIES:	ONE LEVEL BUILDING
HOSPITAL:	59,066 SQ. FT.
RURAL HEALTH CLINIC:	4,554 SQ. FT.
TOTAL BUILDING AREA:	63,620 SQ. FT.

■ ***BUILDING HEIGHTS AND AREAS SECTIONS 503, 504, 507***

MAXIMUM ALLOWABLE BUILDING HEIGHT - TABLE 503
MAXIMUM ALLOWABLE BUILDING HEIGHT.....65'-0"
ACTUAL BUILDING HEIGHT.....22'-0"
MAXIMUM NUMBER OF STORIES.....1
ACTUAL NUMBER OF STORIES.....1

MAXIMUM ALLOWABLE BUILDING AREA - SECTION 503, 506.3
33,000 SF

■ ***CONSTRUCTION TYPE: SECTION 602***
TYPE II-B UNPROTECTED WITH AUTOMATIC SPRINKLER SYSTEM

FIRE RESISTANT RATING REQUIREMENTS (HOURS) - TABLE 601
STRUCTURAL FRAME.....0
BEARING WALLS.....0
FLOOR CONSTRUCTION.....0
ROOF CONSTRUCTION.....0

■ ***OCCUPANT LOAD TABLE 1004.1.1 MAXIMUM FLOOR AREA ALLOWANCES***

INSTITUTIONAL AREAS.....1 OCCUPANT PER 240 SQ. FT.
TOTAL FLOOR AREA.....63,620 SQ. FT.
TOTAL OCCUPANT LOAD.....265
(63,620 ÷ 240 = 265)

■ ***EGRESS WIDTH PER OCCUPANT SERVED TABLE 1005.1***
MUST PROVIDE .20" OF EXIT/EGRESS WIDTH PER OCCUPANT
TOTAL REQUIRED CLEAR EXIT WIDTH: 265 OCC. x .20" = 53"

■ ***COMMON PATH OF EGRESS TRAVEL TABLE 1014.3***
MAXIMUM DISTANCE ALLOWED.....75'

■ ***EXIT ACCESS TRAVEL DISTANCE FOR OCCUPANCY TABLE 1016.1***
MAXIMUM DISTANCE ALLOWED.....200'

■ ***CORRIDOR FIRE RESISTANT RATING (HOURS) TABLE 1017.1***
HOURS REQUIRED.....0

■ ***MINIMUM CORRIDOR WIDTH PARAGRAPH 1017.2***
MINIMUM CORRIDOR WIDTH ALLOWED.....72"
MIN. CORRIDOR WIDTH ALLOWED FOR PATIENT TRANSFER.....96"

■ ***MAXIMUM DEAD END CORRIDOR DISTANCE PARAGRAPH 1017.3.3***
DEAD END CORRIDOR DISTANCE ALLOWED.....20'-0"

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RECISTERED ARCHITECT Kenneth A. Oubre 6-30-2020 STATE OF MISSISSIPPI

Project No: 18015 Revisions: 1 JANUARY 08, 2020 - ADDENDUM 3
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP, AR
Checked: KAO

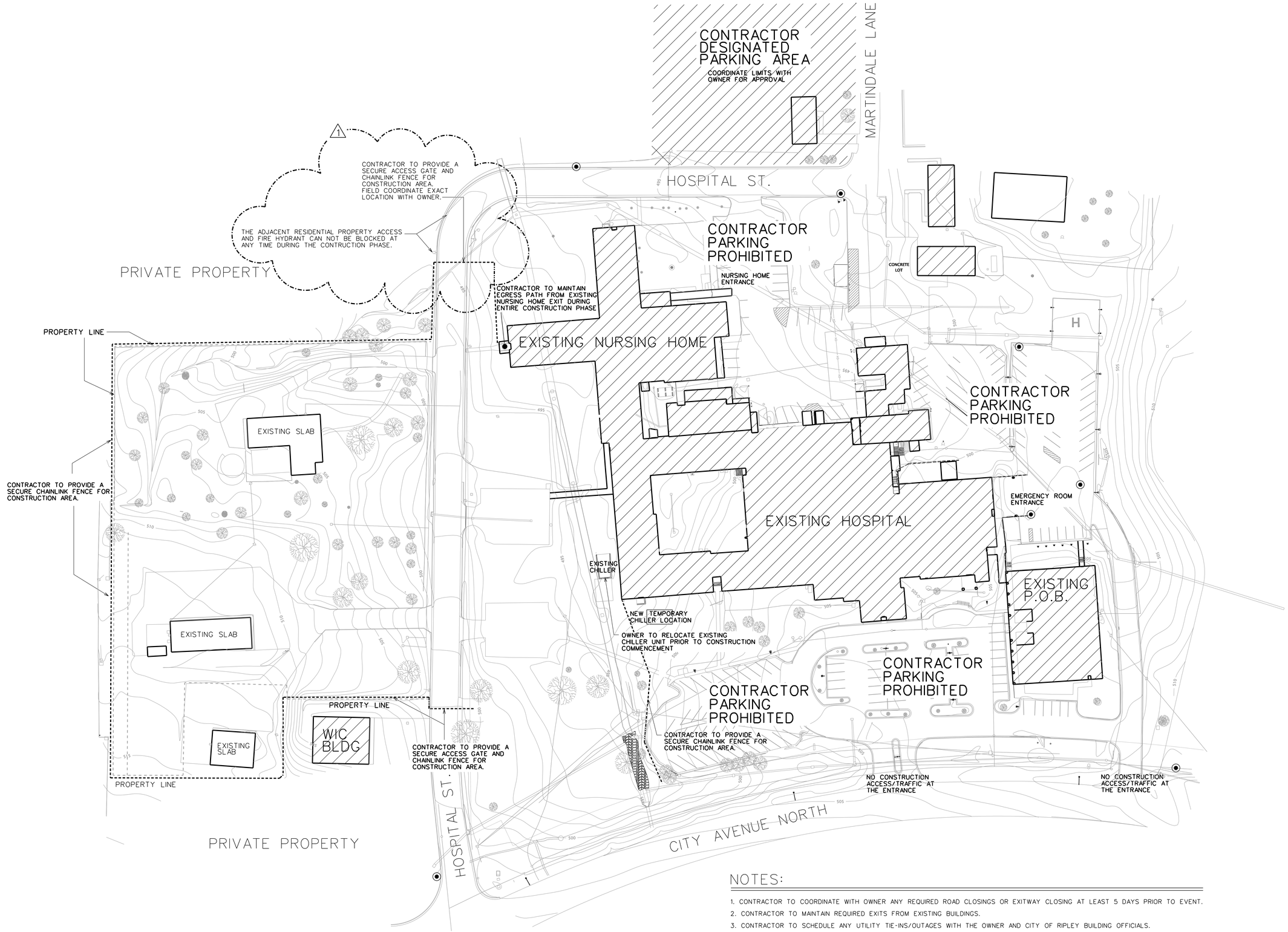
REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

- INDEX, SYMBOLS, CODE NOTES AND ABBREVIATIONS

Sheet Number : G001

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL RIPLEY, MISSISSIPPI P.N. 18015

1" = 1'-0" GRAPHIC SCALE
3/4" = 1'-0" GRAPHIC SCALE
1/2" = 1'-0" GRAPHIC SCALE
3/8" = 1'-0" GRAPHIC SCALE
1/4" = 1'-0" GRAPHIC SCALE
1/2" = 1'-0" GRAPHIC SCALE
1/8" = 1'-0" GRAPHIC SCALE



NOTES:

1. CONTRACTOR TO COORDINATE WITH OWNER ANY REQUIRED ROAD CLOSINGS OR EXITWAY CLOSING AT LEAST 5 DAYS PRIOR TO EVENT.
2. CONTRACTOR TO MAINTAIN REQUIRED EXITS FROM EXISTING BUILDINGS.
3. CONTRACTOR TO SCHEDULE ANY UTILITY TIE-INS/OUTAGES WITH THE OWNER AND CITY OF RIPLEY BUILDING OFFICIALS.
4. CONTRACTOR TO PROVIDE WHEEL CLEANING AREAS AT ENTRY ROADS TO AVOID BUILD UP OF MUD AND DIRT FROM EQUIPMENT ON ALL PUBLIC ROADS. THIS SHALL BE DONE ON A CONTINUOUS BASIS.

A G002 EXISTING SITE PLAN - LIMITS OF CONSTRUCTION
SCALE : 1" = 40'-0"

NORTH

1" = 1'-0" GRAPHIC SCALE
3/4" = 1'-0" GRAPHIC SCALE
1/2" = 1'-0" GRAPHIC SCALE
1/4" = 1'-0" GRAPHIC SCALE
1/8" = 1'-0" GRAPHIC SCALE

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN: 18015

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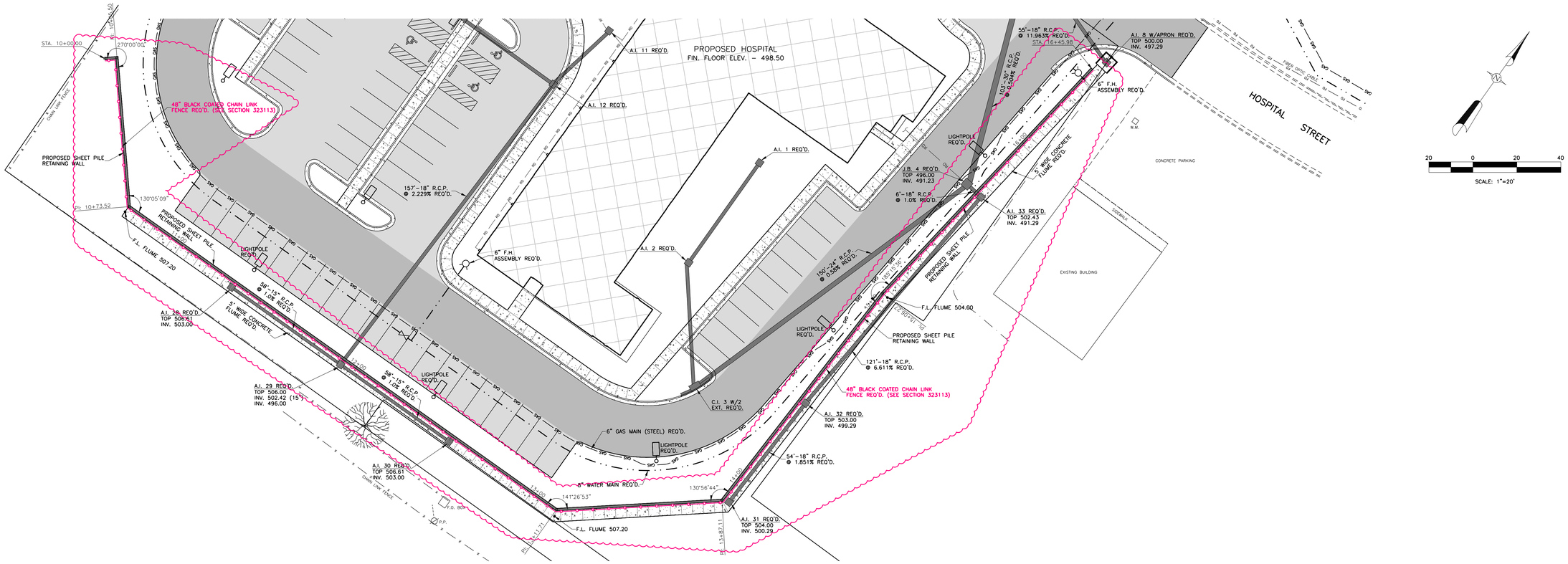
REGISTERED ARCHITECT Kenneth Alan Oubre STATE OF MISSISSIPPI

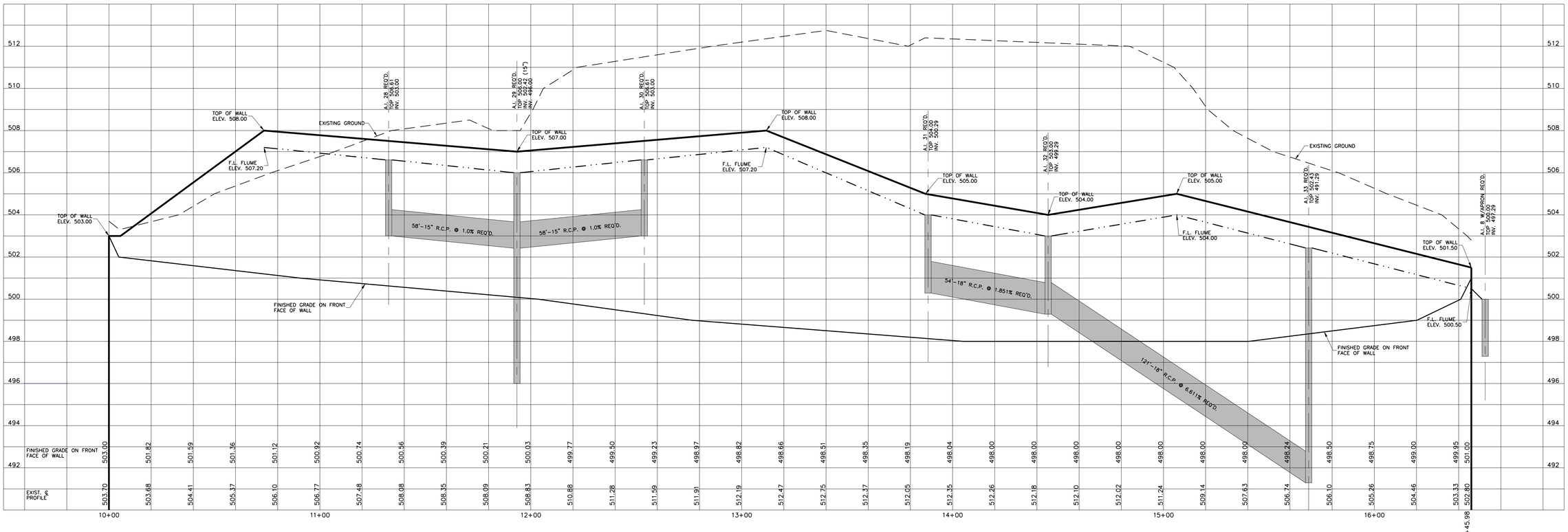
Project No: 18015 Revisions: 1 JANUARY 08, 2020 - ADDENDUM 3
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP, AR
Checked: KAO

- EXISTING SITE PLAN - LIMITS OF CONSTRUCTION

Sheet Number: G002

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI





ROYALD C. McMASTER JR. LICENSED PROFESSIONAL ENGINEER AND SURVEYOR No. 15884 STATE OF MISSISSIPPI

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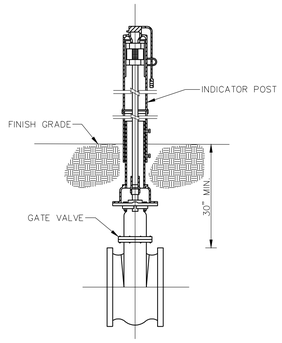
Project No: 18015 Revisions: 1 ADDENDUM #01-2020-01-08
Date: 4 DECEMBER 2019
Drawn: D.P.
Checked: R.C.M.

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : C5.2

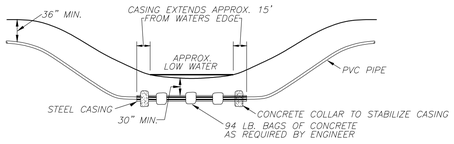
PLAN & PROFILE - RETAINING WALL

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

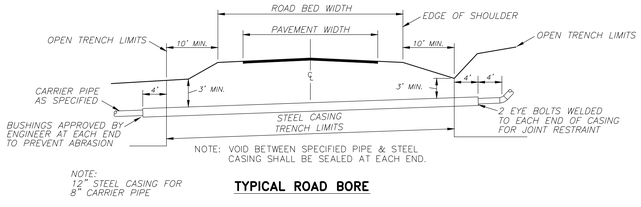


POST INDICATOR VALVE DETAIL

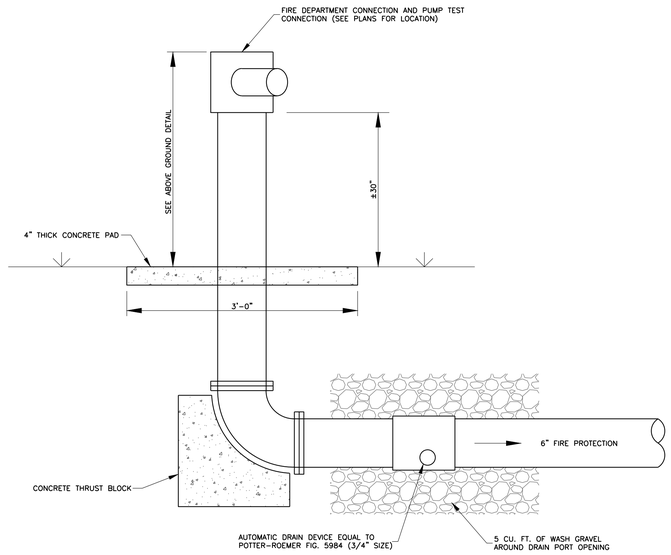
TO COMPLY WITH F-5760 AND/OR NFPA 13, OR LOCAL CODES



TYPICAL CREEK CROSSING FOR P.V.C. PIPE

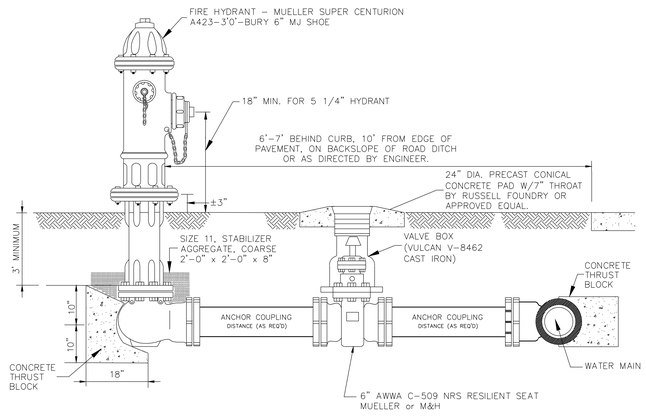


TYPICAL ROAD BORE

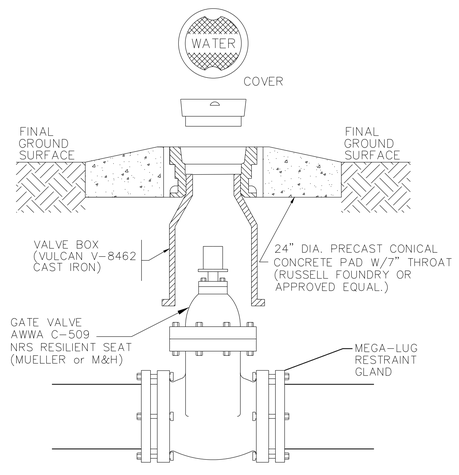


FIRE DEPARTMENT AND CONNECTION

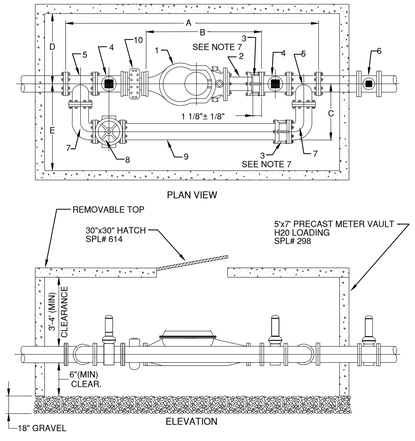
N.T.S.



FIRE HYDRANT ASSEMBLY



TYPICAL GATE VALVE



NO.	NAME	LENGTH
A	OVERALL LENGTH	79"
B	METER + NIPPLE + FCA	34 1/2"
C	CENTER OF MAINLINE TO OUTSIDE OF BYPASS	17 1/2"
D	CENTERLINE OF MAINLINE TO INSIDE OF VAULT	30"
E	CENTERLINE OF MAINLINE TO INSIDE OF VAULT	30"

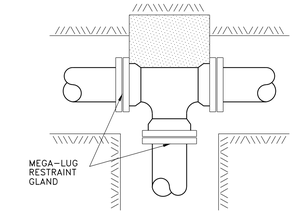
NO.	NAME	LENGTH
1	4" COMPOUND METER	21"*
2	4" FLANGED x PLAIN END	12"
3	4" FLANGED COUPLING ADAPTER	5"
4	4" GATE VALVE SQUARE NUT	9"
5	4" x 4" x 4" FLANGED TEE	13"
6	PROPERTY OWNER'S 4" GATE VALVE SQUARE NUT	9"
7	4" FLANGED LONG RADIUS ELBOW 90°	
8	4" BYPASS GATE VALVE with HANDWHEEL TO BE LOCKED IN CLOSED POSITION	9"
9	4" BYPASS DUCTILE IRON PIPE	
10	4" STRAINER	7½"

*DIMENSIONS- SUBJECT TO CHANGE; CHECK WITH INSPECTOR

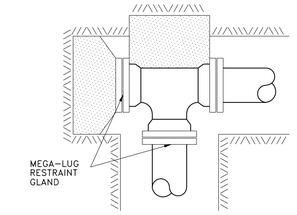
NOTES:

1. PIPE AND METER SIZE SHALL BE AS DETERMINED BY OWNER; APPROVAL BY CITY OF RIPLEY.
2. METER VAULT MUST BE OUT OF VEHICULAR TRAFFIC.
3. MAIN LINE AND BYPASS VALVES WILL BE RESILIENT SEAT TYPE WITH CORROSION RESISTANT FUSION BONDED EPOXY COATING INSIDE AND OUTSIDE, NON-RISING STEM. MAIN LINE VALVES SHALL HAVE SQUARE OPERATING NUTS. BYPASS VALVE WILL HAVE A HANDWHEEL. PROPERTY OWNER'S VALVE MUST BE LOCATED OUTSIDE OF THE NEW BRAUNFELS UTILITIES METER VAULT.
4. PRIOR APPROVAL WILL BE NEEDED IF HEIGHT OF VAULT EXCEEDS 72".
5. HATCH OPENING WILL BE 30" X 30".
6. IRON PIPE TAPPING SLEEVE UNDER PAVEMENT SHALL BE IMBEDDED IN GRANULAR MATERIALS AS REQUIRED BY SPECIFICATIONS; BACKFILL ABOVE GRANULAR BEDDING AS REQUIRED BY SPECIFICATIONS.
7. DOUBLE HARNESS MJ WITH TIE RODS. ALL OTHER FITTINGS INSIDE VAULT WILL BE FLANGED.
8. CONTACT CITY OF RIPLEY UTILITIES PRIOR TO INSTALLATION OF COMPOUND METERS FOR PROPER DOMESTIC DEMANDS.
9. NOTCHES WHERE PIPING GOES THROUGH VAULT SHALL BE FILLED WITH MORTAR.
10. THE TOP OF THE METER VAULT SHALL BE AT AN ELEVATION SUCH THAT THE SURROUNDING GROUND SLOPES AWAY FROM THE VAULT.

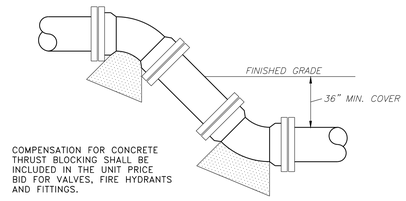
WATER METER AND VAULT DETAILS



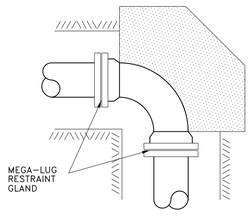
TEE



PLUGGED TEE



VERTICAL BEND



90° BEND

TYPICAL BLOCKING ON WATER MAIN

(3000 PSI CONCRETE REQUIRED)

BEARING AREA IN SQ. FT.

NOMINAL PIPE DIAMETER (IN)	DEAD–END OR TEE	90° BEND	45° BEND	22–1/2° BEND	11–1/4° BEND
4	2.0	2.0	2.0	2.0	2.0
6	2.0	2.0	2.0	2.0	2.0
8	3.0	3.0	2.0	2.0	2.0
12	5.0	5.0	4.0	3.0	3.0
16	8.0	12.0	6.0	4.0	4.0
4	———	———	6.0 (.22)	4.0(.15)	4.0(.15)
6	———	———	14.0(.52)	6.0 (.22)	4.0 (.15
8	———	———	27.0(1.0)	9.0(.33)	6.0(.22))
12	———	———	68.0(2.5)	22.0(.80)	9.0(.33)
16	———	———	90.0 (3.33)	52.0(1.9)	18.0(.67)
VOLUME OF BLOCKS INCLUDING SOIL LOAD CU. FT. (CU. YDS.)					

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Project No: 18015 Revisions: ⚠ ADDENDUM #03–2019–01–08
Date: 4 DECEMBER 2019
Drawn: D.P.
Checked: R.C.M.

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL

RIPLEY, MISSISSIPPI

McMASTER & ASSOCIATES, INC.
CIVIL ENGINEERS & LAND SURVEYORS
212 WATERFORD SQUARE
SUITE 300
MADISON, MS 39110
601.605.1090

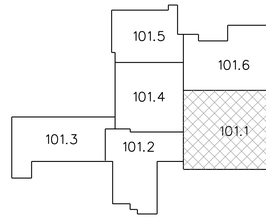
Sheet Number : C6.5

WATER DETAILS

REPLACMENT FACILITY FOR TIPPAH COUNTY HOSPITAL RIPLEY, MISSISSIPPI PN 18015

EXISTING NURSING HOME

EXISTING HOSPITAL



KEY PLAN NO SCALE

REFER TO ENLARGED PLAN SHEETS NOTED ABOVE FOR INTERIOR WALL DIMENSIONS AND NOTES.

LIFE SAFETY/WALL LEGEND

SYMBOL	DESCRIPTION
	2-HOUR FIRE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	2-HOUR FIRE/SMOKE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	1-HOUR FIRE WALL: U.L. DES. NO. U419 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" TYPE "X" GYPSUM BOARD EACH SIDE, EXTENDED TO 1 HR FIRE-RATED CEILING ASSEMBLY. NOTE: IN ROOMS WITHOUT FIRE-RATED CEILING, EXTEND WALLS TO DECK. 3" SOUND ATTENUATION BATT TO CEILING.
NOTE: BUILD ALL RATED WALLS IN STRICT ACCORDANCE WITH UL DESIGN.	
	NON-RATED 5" NOMINAL WALL (4⅞" ACTUAL) (SOUND-INSULATED) 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO 8" ABOVE CEILING WITH 3" SOUND BATTS
	NON-RATED 5" NOMINAL WALL (4⅞" ACTUAL) (SOUND-INSULATED) 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES, PENETRATIONS, ETC. WITH ¼" (MIN) ROUND BEAD OF ACOUTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET J678)
	NON-RATED 7" NOMINAL WALL (6⅛" ACTUAL) (SOUND-INSULATED) 3⅝" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES, PENETRATIONS, ETC. WITH ¼" (MIN) ROUND BEAD OF ACOUTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET J678)
NOTE: MAJORITY OF ROOMS HAVE 5" NOMINAL WALLS, HOWEVER REFER TO PLAN SHEETS FOR WALLS REQUIRED TO BE 6" OR 7" NOMINAL.	
NOTE: ALL ROOMS TO HAVE 3" OF SOUND ATTENUATION BATTS AROUND PERIMETER OF L.A.T. CEILINGS (EXCLUDING JANITORS AND HOUSEKEEPING CLOSETS)	
F.E.C. SEMI-RECESSED; F.E.C. EXT. SURF. MOUNTED; F.E. WALL MOUNTED	FIRE EXTINGUISHER CABINETS MUST BE LOCATED SO TRAVEL DISTANCE TO EXTINGUISHER IS LESS THAN 75 FEET (EXT. CABINET TO BE STAINLESS STL)

NOTE: GC TO RECESS SLAB 4" FOR WALK-IN COOLER/FREEZER. COORDINATE WITH OWNER'S KITCHEN EQUIPMENT VENDOR ON FINAL DIMENSIONS OF ROUGH-IN.

NOTE: GC TO COORDINATE WITH OWNER'S KITCHEN EQUIPMENT VENDOR ON FINAL DIMENSIONS OF ALL ELECTRICAL, MECHANICAL AND PLUMBING ROUGH-IN PRIOR TO SLAB POUR.

A A101A FLOOR PLAN - PART "A"
SCALE : ⅛" = 1'-0"

NORTH

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REGISTERED ARCHITECT Kentucky Jackson Dean STATE OF MISSISSIPPI

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP, AR
Checked: KAO

Revisions: 1 JANUARY 08, 2020 - ADDENDUM 3

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : A101A - FLOOR PLAN - PART "A"

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

1/8" =1'-0" GRAPHIC SCALE | 1/4" =1'-0" GRAPHIC SCALE | 1/2" =1'-0" GRAPHIC SCALE | 3/4" =1'-0" GRAPHIC SCALE | 1" =1'-0" GRAPHIC SCALE | 1 1/2" =1'-0" GRAPHIC SCALE | 3" =1'-0" GRAPHIC SCALE

A101.1 FLOOR PLAN - PART "1"
SCALE : 1/4" = 1'-0"

NORTH
GRAPHIC SCALE: 1/4" = 1'-0"

- FLOOR PLAN - PART "1"

LIFE SAFETY/WALL LEGEND

SYMBOL	DESCRIPTION
	2-HOUR FIRE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" GYP. BD. EACH SIDE EXTEND TO DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	2-HOUR FIRE/SMOKE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" TYPE "X" GYP. BD. EACH SIDE, EXTENED TO ⅝" DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	1-HOUR FIRE WALL: U.L. DES. NO. U419 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" TYPE "X" GYPSUM BOARD EACH SIDE EXTENDED TO 1-HR FIRE-RATED CEILING ASSEMBLY. NOTE IN ROOMS WITHOUT ATTENUATION BATT TO CEILING.
	NOTE: BUILD ALL RATED WALLS IN STRICT ACCORDANCE WITH U.L. DESIGN
	NON-RATED 5" NOMINAL WALL (4⅝" ACTUAL) (SOUND-INSULATED) 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" GYP. BD. EACH SIDE EXTEND WALL TO 8" ABOVE CEILING WITH 3" SOUND BATTS
	NON-RATED 5" NOMINAL WALL (4⅝" ACTUAL) (SOUND-INSULATED) 3⅝" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" GYP. BD. EACH SIDE EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES, PENETRATIONS, ETC. WITH ¼" MIN. ROUND BEAD OF ACOUSTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET #6788)
	NON-RATED 7" NOMINAL WALL (6⅝" ACTUAL) (SOUND-INSULATED) 6" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" GYP. BD. EACH SIDE EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES, PENETRATIONS, ETC. WITH ¼" MIN. ROUND BEAD OF ACOUSTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET #6789)
	NOTE: MAJORITY OF ROOMS HAVE 5" NOMINAL WALLS, HOWEVER REFER TO PLAN SHEETS FOR WALLS REQUIRED TO BE 6" OR 7" NOMINAL. NOTE: ALL ROOMS TO HAVE 3" OF SOUND ATTENUATION BATTS AROUND PERIMETER OF FLAT CEILINGS (EXCLUDING JANITORS AND HOUSEKEEPING CLOSETS)
F.E.C. SEMI-RECESSED	FIRE EXTINGUISHER CABINETS MUST BE LOCATED SO TRAVEL DISTANCE TO EXTINGUISHER IS LESS THAN 75 FEET. (EXT. CABINET TO BE STAINLESS STL)
F.E.C. EXT. SURF. MOUNTED	
F.E. WALL MOUNTED	

Sheet Number :
A101.1

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Project No: 18015 Revisions: 1 JANUARY 08, 2020 - ADDENDUM 3
Date: 4 DECEMBER 2019
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1/8" =1'-0" GRAPHIC SCALE | 1/4" =1'-0" GRAPHIC SCALE | 1/2" =1'-0" GRAPHIC SCALE | 3/4" =1'-0" GRAPHIC SCALE | 1" =1'-0" GRAPHIC SCALE | 1 1/2" =1'-0" GRAPHIC SCALE | 3" =1'-0" GRAPHIC SCALE

A101.6

FLOOR PLAN - PART "6"

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

NORTH

GRAPHIC SCALE 1/4" = 1'-0"

NOTE 1:
ALL WALLS WITHIN THIS ROOM TO HAVE 1/16" LEAD SHIELDING.
ALL SHIELDING MUST EXTEND FROM FINISH FLOOR TO 7'-0" A.F.F.
ALL PERFORATIONS (EXCLUDING DRYWALL SCREWS) MUST BE COVERED WITH SUPPLEMENTARY LEAD OF EQUAL THICKNESS AS REQUIRED FOR WALL.
ALL SEAMS MUST OVERLAP BY A MIN. 1".
ALL ELECTRICAL OUTLETS, SWITCH BOXES, UTILITY RECESSES AND OTHER PENETRATIONS OF THIS BARRIER MUST BE LINED WITH LEAD EQUIVALENT AS REQUIRED FOR THE WALL.
ALL DOORS, DOOR FRAMES, WINDOW FRAMES AND WINDOW GLAZING MUST MAINTAIN THE SAME SHIELDING PROPERTIES AS THE WALL IT IS INSTALLED WITHIN.

- FLOOR PLAN - PART "6"

Sheet Number : A101.6

REPLACEMENT FACILITY FOR
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RIPLEY, MISSISSIPPI

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Drawn: FBH, MH, MP, AR
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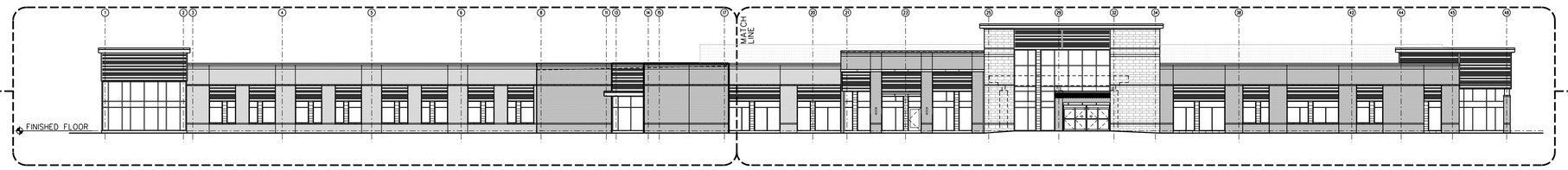
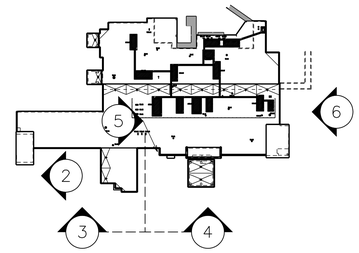
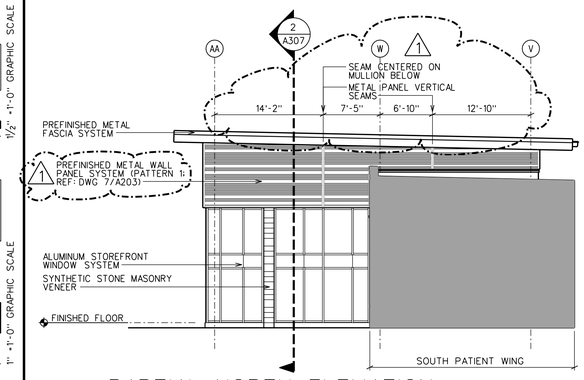


1 A201 EAST ELEVATION

SCALE : 1/16" = 1'-0"

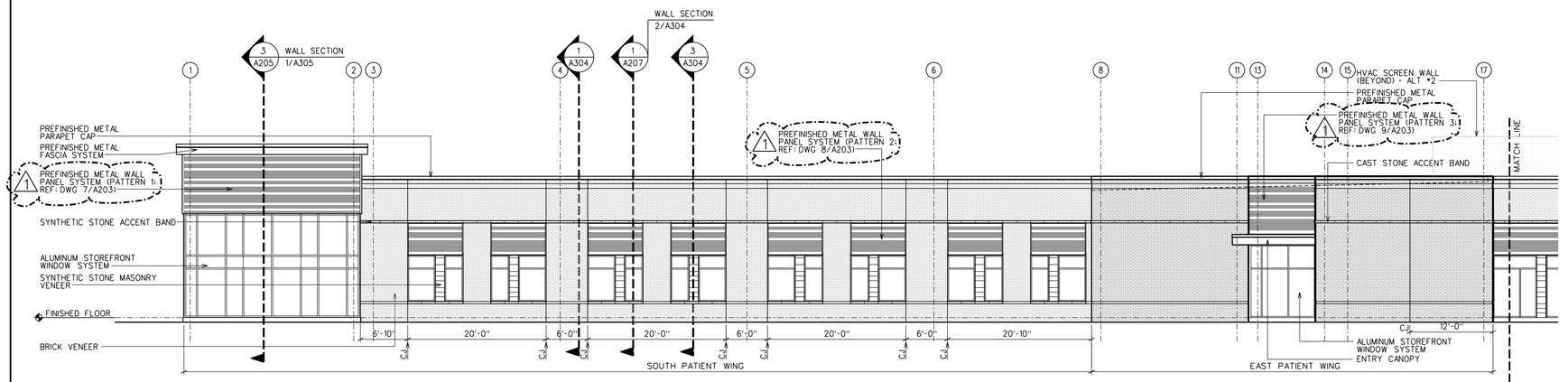


KEY PLAN (N.T.S.)



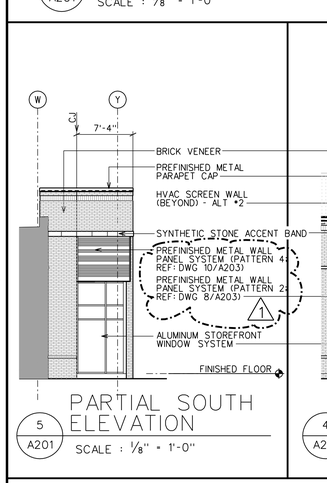
2 A201 PARTIAL NORTH ELEVATION - INPATIENT REHAB

SCALE : 1/8" = 1'-0"



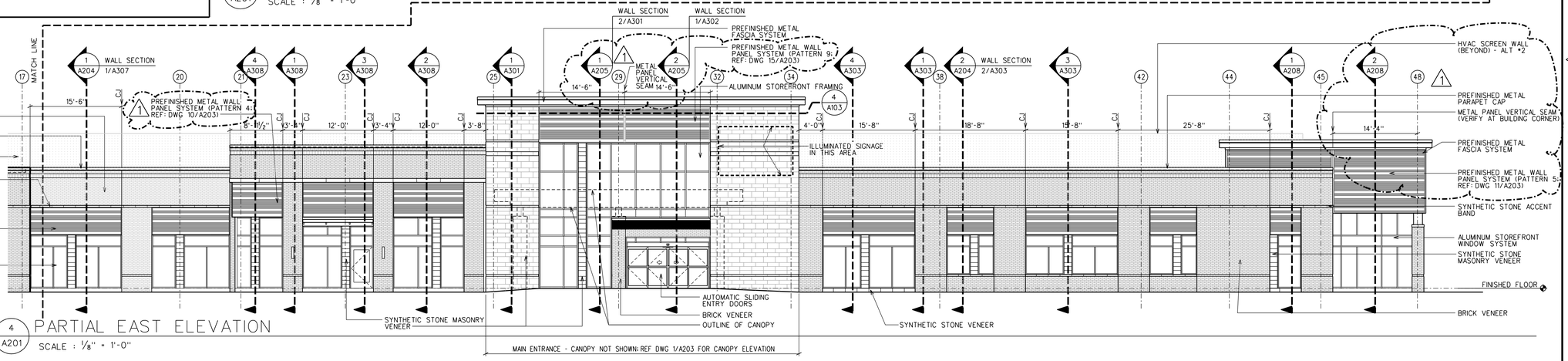
3 A201 PARTIAL EAST ELEVATION

SCALE : 1/8" = 1'-0"



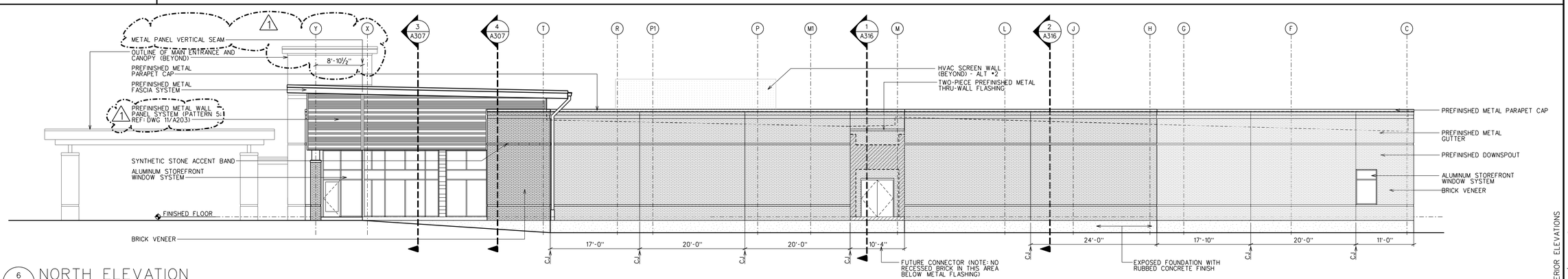
5 A201 PARTIAL SOUTH ELEVATION

SCALE : 1/8" = 1'-0"



4 A201 PARTIAL EAST ELEVATION

SCALE : 1/8" = 1'-0"



6 A201 NORTH ELEVATION

SCALE : 1/8" = 1'-0"

3" = 1'-0" GRAPHIC SCALE

1½" = 1'-0" GRAPHIC SCALE

1" = 1'-0" GRAPHIC SCALE

¾" = 1'-0" GRAPHIC SCALE

½" = 1'-0" GRAPHIC SCALE

¼" = 1'-0" GRAPHIC SCALE

⅛" = 1'-0" GRAPHIC SCALE

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REGISTERED ARCHITECT Kenneth Allen Oubre 23564 STATE OF MISSISSIPPI

Revisions: 1 JANUARY 08, 2020 (ADDENDUM #3)

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP, AR
Checked: KAO

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL

RIPLEY, MISSISSIPPI

- EXTERIOR ELEVATIONS

Sheet Number : A201

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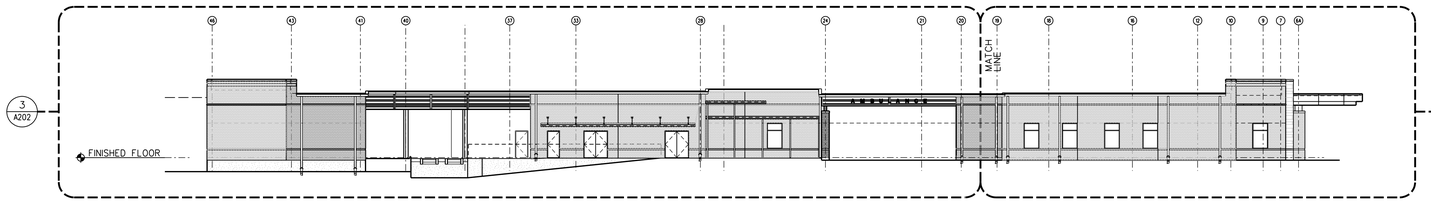
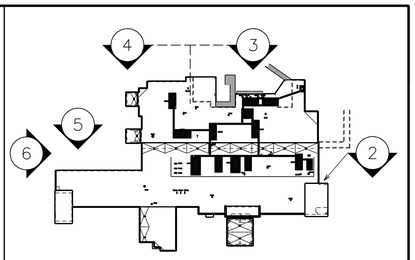
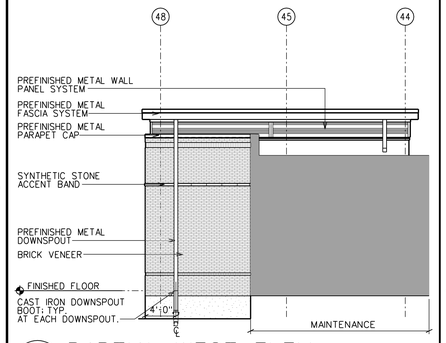


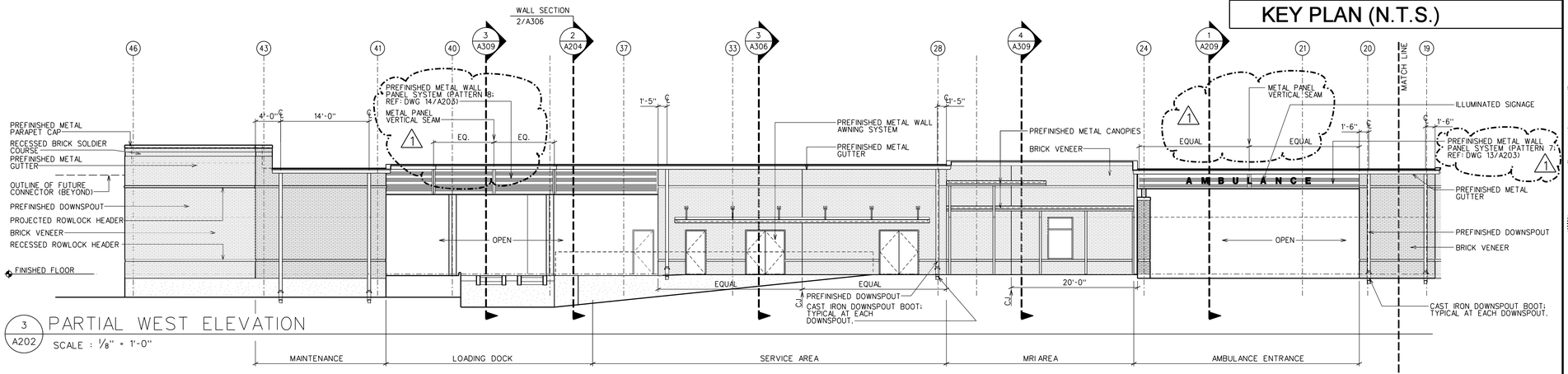
1 A202 WEST ELEVATION
SCALE : 1/16" = 1'-0"



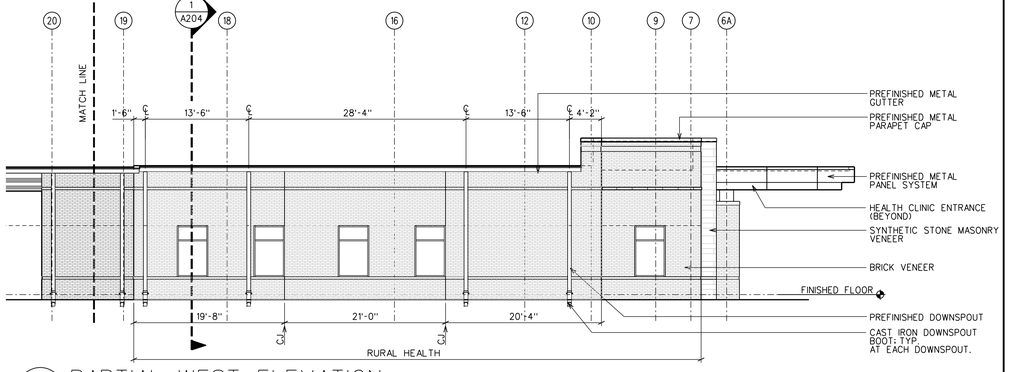
KEY PLAN (N.T.S.)



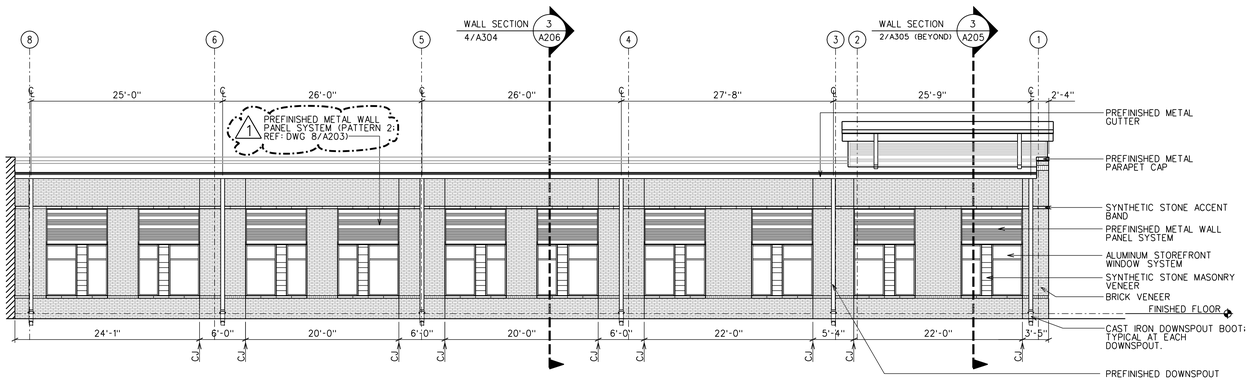
2 A202 PARTIAL WEST ELEV.
SCALE : 1/8" = 1'-0"



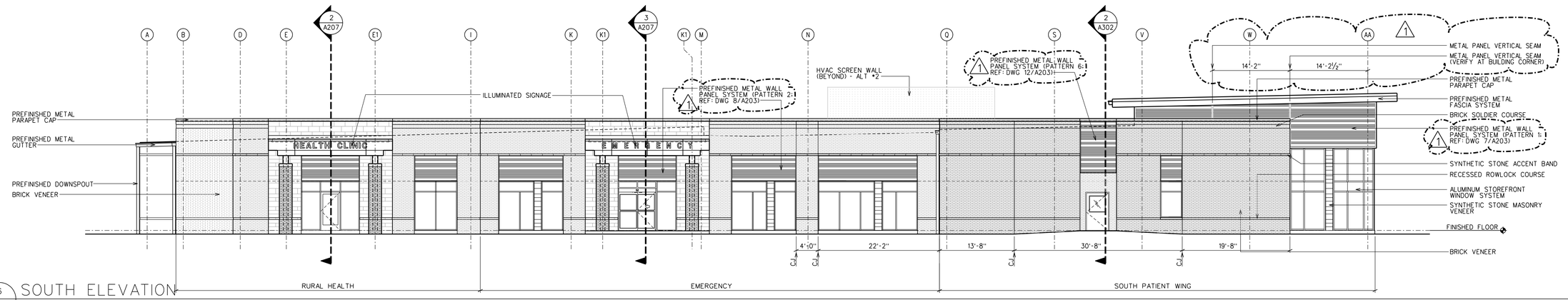
3 A202 PARTIAL WEST ELEVATION
SCALE : 1/8" = 1'-0"



4 A202 PARTIAL WEST ELEVATION
SCALE : 1/8" = 1'-0"



5 A202 PARTIAL WEST ELEVATION - SOUTH PATIENT WING
SCALE : 1/8" = 1'-0"



6 A202 SOUTH ELEVATION
SCALE : 1/8" = 1'-0"

3" = 1'-0" GRAPHIC SCALE
1½" = 1'-0" GRAPHIC SCALE
1" = 1'-0" GRAPHIC SCALE
¾" = 1'-0" GRAPHIC SCALE
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Revisions: 1 JANUARY 08, 2020 (ADDENDUM #3)
Project No: 18015
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP, AR
Checked: KAO

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : A202 - EXTERIOR ELEVATIONS

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL RIPLEY, MISSISSIPPI PN 18015

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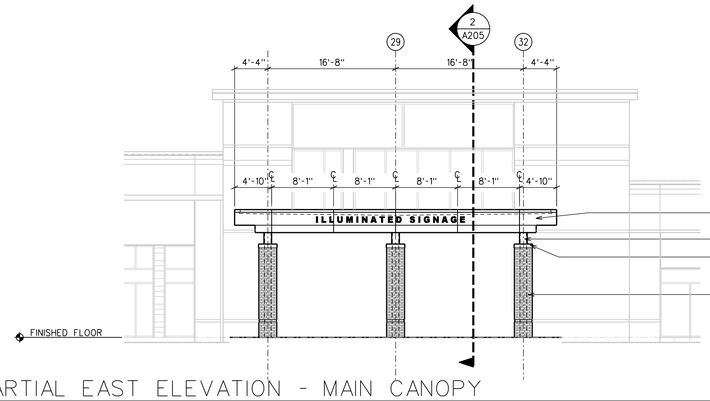
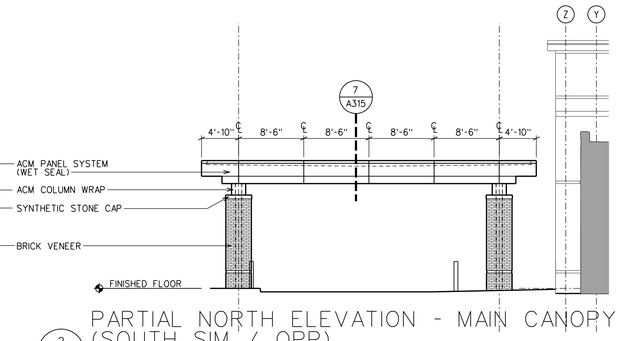


1 A203 PARTIAL EAST ELEVATION - MAIN CANOPY

SCALE : 1/8" = 1'-0"



2 A203 PARTIAL NORTH ELEVATION - MAIN CANOPY (SOUTH SIM / OPP)

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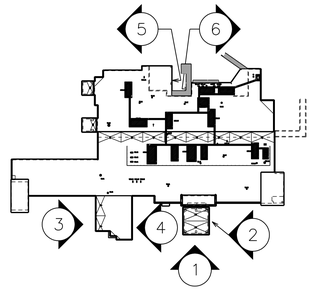
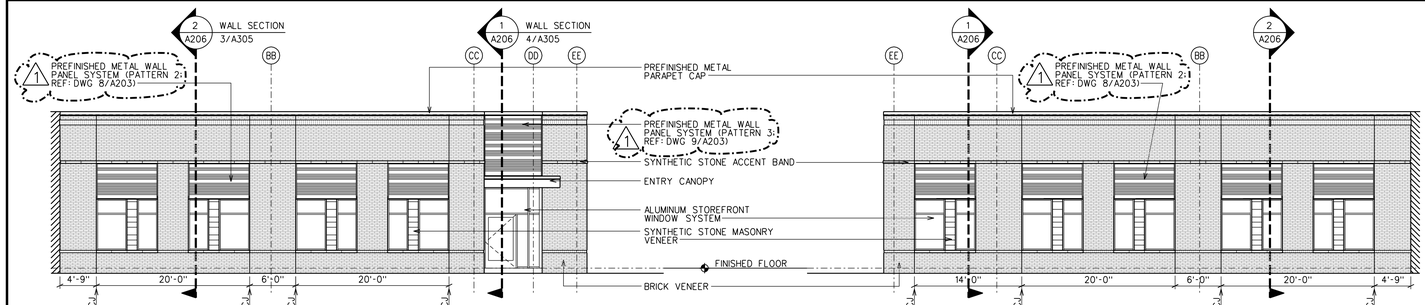


KEY PLAN (N.T.S.)

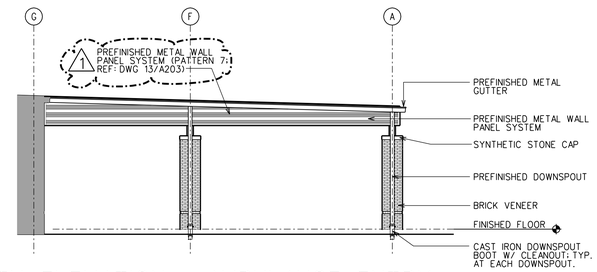


3 A203 SOUTH ELEVATION - EAST PATIENT WING

SCALE : 1/8" = 1'-0"

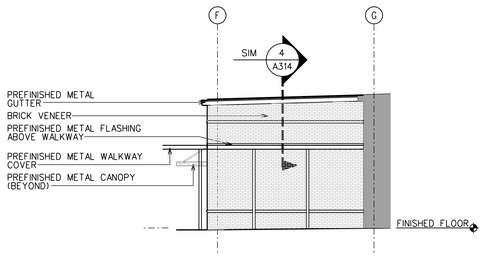
4 A203 NORTH ELEVATION - EAST PATIENT WING

SCALE : 1/8" = 1'-0"



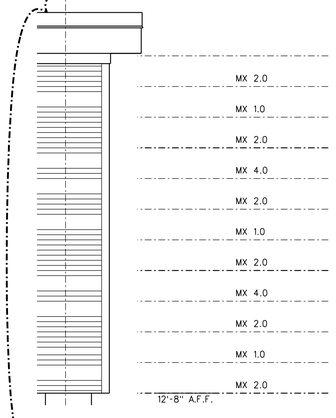
5 A203 NORTH ELEVATION - AMBULANCE ENTRY

SCALE : 1/8" = 1'-0"



6 A203 SOUTH ELEVATION - MECHANICAL

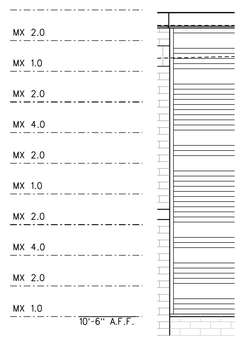
SCALE : 1/8" = 1'-0"



REF: ELEVATIONS FOR VERTICAL SEAM LOCATIONS.
PATTERN OCCURS AT DINING

11 A203 METAL WALL PANEL - PATTERN 5

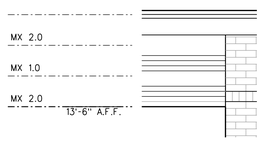
SCALE : 1/2" = 1'-0"



THESE PANELS SPAN FULL OPENING WIDTH, NO VERTICAL SEAMS.
PATTERN OCCURS AT SOUTH PATIENT WING EXIT.

12 A203 METAL WALL PANEL - PATTERN 6

SCALE : 1/2" = 1'-0"



REF: ELEVATIONS FOR VERTICAL SEAM LOCATIONS.
PATTERN OCCURS OVER AMBULANCE ENTRY.

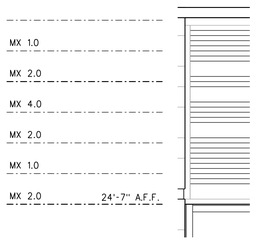
13 A203 METAL WALL PANEL - PATTERN 7

SCALE : 1/2" = 1'-0"

REF: ELEVATIONS FOR VERTICAL SEAM LOCATIONS.
PATTERN OCCURS OVER LOADING DOCK.

14 A203 METAL WALL PANEL - PATTERN 8

SCALE : 1/2" = 1'-0"

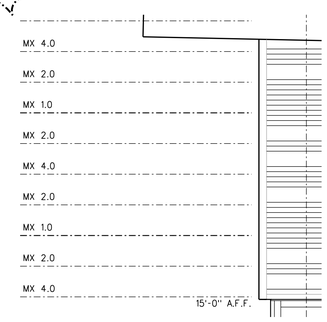


REF: ELEVATIONS FOR VERTICAL SEAM LOCATIONS.
PATTERN OCCURS OVER MAIN ENTRANCE.

15 A203 METAL WALL PANEL - PATTERN 9

SCALE : 1/2" = 1'-0"

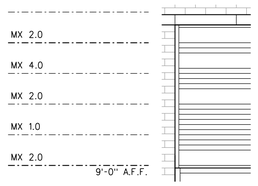
4



REF: ELEVATIONS FOR VERTICAL SEAM LOCATIONS.
PATTERN OCCURS AT INPATIENT REHAB

7 A203 METAL WALL PANEL - PATTERN 1

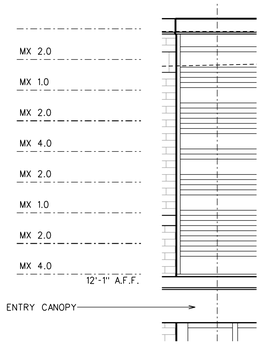
SCALE : 1/2" = 1'-0"



THESE PANELS SPAN FULL OPENING WIDTH, NO VERTICAL SEAMS.
PATTERN OCCURS AT OPENINGS FOR:
- ALL PATIENT ROOMS
- ER ENTRANCE
- CORRIDOR @ ER
- RCH WAITING ROOM AND ENTRY
- ADMIN / BUSINESS OFFICE WINDOWS

8 A203 METAL WALL PANEL - PATTERN 2

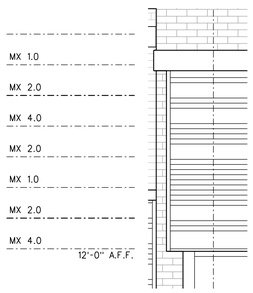
SCALE : 1/2" = 1'-0"



NO VERTICAL SEAMS AT THIS CORNER.
PATTERN OCCURS AT EAST PATIENT WING EXIT.

9 A203 METAL WALL PANEL - PATTERN 3

SCALE : 1/2" = 1'-0"



THESE PANELS SPAN FULL OPENING WIDTH, NO VERTICAL SEAMS.
PATTERN OCCURS AT OPENINGS FOR:
- THERAPY
- IOP CORRIDOR
- CLASSROOM

10 A203 METAL WALL PANEL - PATTERN 4

SCALE : 1/2" = 1'-0"

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REGISTERED ARCHITECT Kenneth Alan Oubre STATE OF MISSISSIPPI

1 JANUARY 08, 2020 (ADDENDUM #3)

Project No: 18015 Revisions:
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP, AR
Checked: KAO

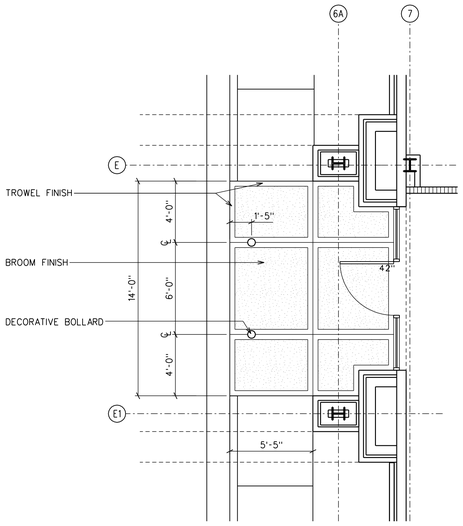
REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : A203

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN: 18015

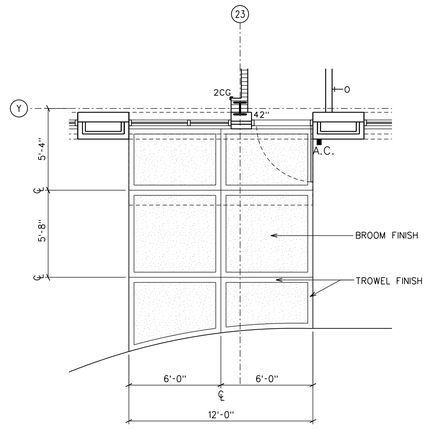
3" = 1'-0" GRAPHIC SCALE
1½" = 1'-0" GRAPHIC SCALE
1" = 1'-0" GRAPHIC SCALE
¾" = 1'-0" GRAPHIC SCALE
½" = 1'-0" GRAPHIC SCALE
¼" = 1'-0" GRAPHIC SCALE
⅛" = 1'-0" GRAPHIC SCALE

...\dgn\18015 A203.dgn 1/7/2020 1:02:09 PM



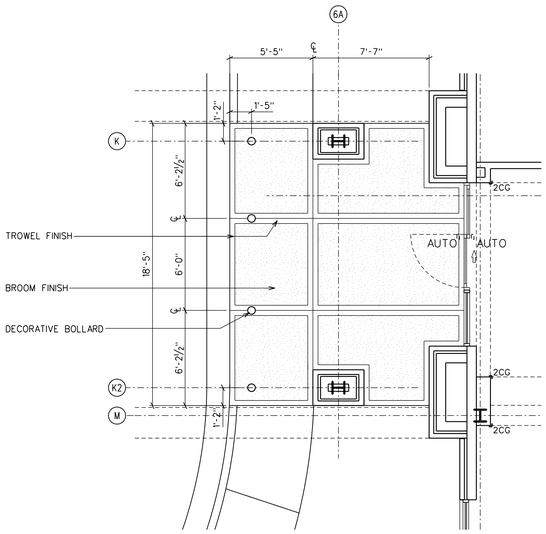
1 A402 PAVING PATTERN DETAIL - HEALTH CLINIC

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



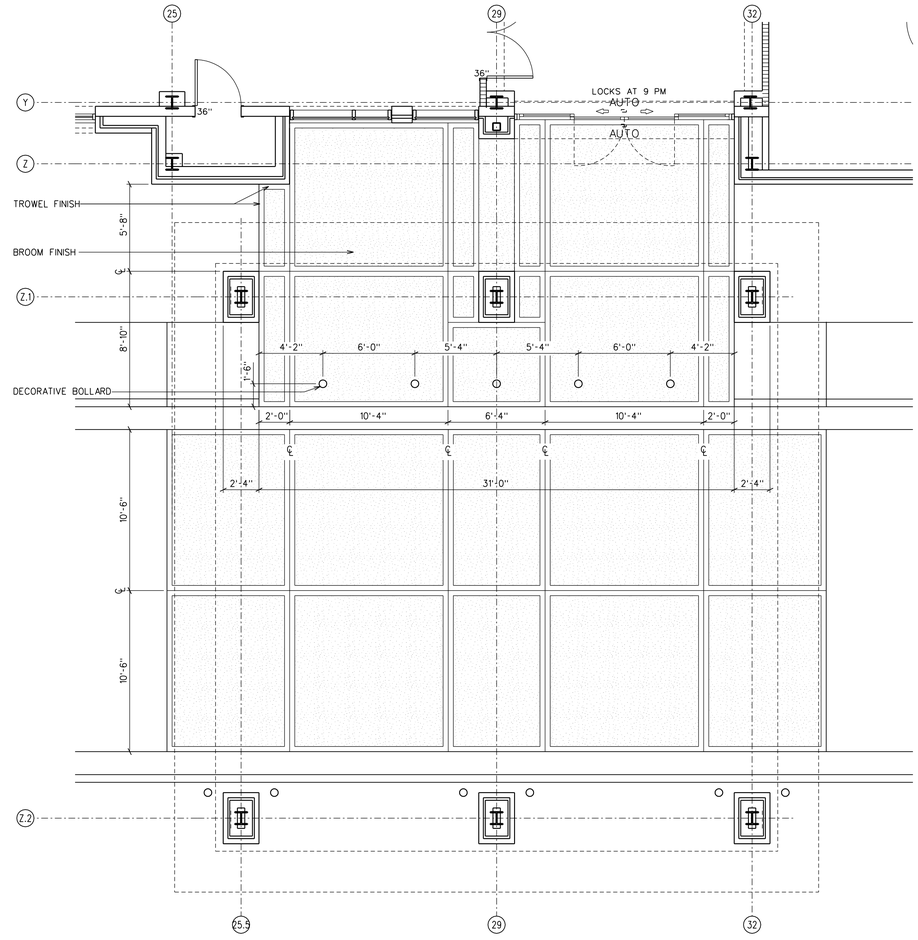
3 A402 PAVING PATTERN DETAIL - IOP

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



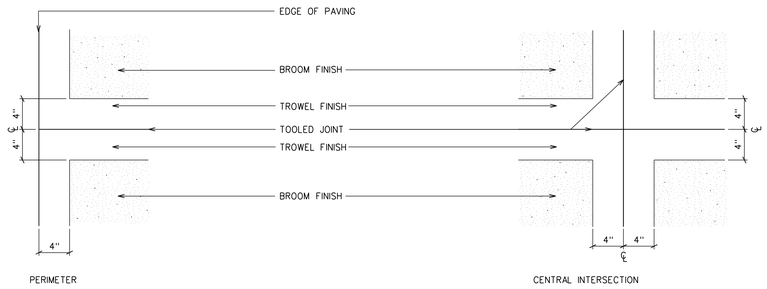
2 A402 PAVING PATTERN DETAIL - EMERGENCY

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



4 A402 PAVING PATTERN DETAIL - MAIN ENTRANCE

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



5 A402 JOINT / PATTERN DETAILS

SCALE : 1 1/2" = 1'-0"

1/8" = 1'-0" GRAPHIC SCALE
1/4" = 1'-0" GRAPHIC SCALE
1/2" = 1'-0" GRAPHIC SCALE
3/4" = 1'-0" GRAPHIC SCALE
1" = 1'-0" GRAPHIC SCALE
1 1/2" = 1'-0" GRAPHIC SCALE
3" = 1'-0" GRAPHIC SCALE

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PN 18015

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REGISTERED ARCHITECT Kenneth Anderson Oubre STATE OF MISSISSIPPI

Project No: 18015 Revisions: 1 JANUARY 08, 2020 (NEW SHEET: ADDENDUM #3)
Date: 4 DECEMBER 2019
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Checked: KAO

EXTERIOR PAVING PATTERNS

Sheet Number : A402

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

INTERIOR FINISH LEGEND

FLOORING:

LVT – LUXURY VINLY TILE

LVT1 – WOOD LOOK PLANKS
MANUFACTURER: MANNINGTON
SERIES:NATURE'S PATH
PATTERN:VIA
SIZE:7.25" X 48"
THICKNESS: 4MM
INSTALLATION: ASHLAR; SEE FLOOR PATTERN SHEETS
REP: BO BROOKSBANK; (901)237-9292
COLOR:
LVT1-A:CAMINO (DARKEST TONEO
LVT1-B:PASSO (MIDDLE TONEO
LVT1-C:STRADA (LIGHTEST TONE)

LVT2 – LINEATE PLANKS
MANUFACTURER: MOHAWK GROUP
SERIES: HOT AND HEAVY
PATTERN:LINEATE
SIZE: 9" X 59"
THICKNESS:5MM
INSTALLATION: ASHLAR; SEE FLOOR PATTERN SHEETS
COLOR:
LVT2-A: FIGURED – 948(GREY FIELD PLANK)
LVT2-B: MAKER – 857 (BROWN ACCENT)
LVT2-C: CORD – 957 (CHARCOAL ACCENT)
LVT2-D: RIDGED – 588 (BLUE ACCENT)

LVT3 – WOVEN LVT
MANUFACTURER:PATCRAFT
PATTERN:1483V PAINTED WEFT
COLOR: 00500 HEDDLE
THICKNESS:9" X 36"
INSTALLATION:HORIZONTAL ASHLAR
REP: LUKE STOIBER; (318)453-6964

SV – SHEET VINLY

SV1 – DARK SHEET VINYL
MANUFACTURER: MANNINGTON
SERIES: BIOSPEC MD HOMOGENEOUS SHEET
COLOR: FLINT 15384
REP: BO BROOKSBANK;(901)237-9292

SV2 – LIGHT SHEET VINYL
MANUFACTURER: MANNINGTON
SERIES: BIOSPEC MD HOMOGENEOUS SHEET
COLOR: SALT 15421
REP: BO BROOKSBANK;(901)237-9292

SF – SAFETY FLOOR

SF1 – KITCHEN FLOOR
MANUFACTURER: ALTRO
PRODUCT: ALTRO STRONGHOLD 30
COLOR: MONSOON – K30153
THICKNESS: 3MM

SC –SEALED CONCRETE

PFT – PORCELAIN FLOOR TILE

PFT1 – LOBBY RESTROOM FLOORS
DISTRIBUTOR:CONCEPT SURFACES
PATTERN:BOTTEGA
COLOR: GREY LIGHT
FINISH:MATTE
SIZE:12" X 24"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE; 78 STERLING SILVER
REP:DON TEJELO; (504)258-9944

PFT2 – PATIENT RESTROOM FLOORS
DISTRIBUTOR:CONCEPT SURFACES
PATTERN: BOTTEGA
COLOR: OLIVE GREY
FINISH:MATTE
SIZE:12" X 24"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE; 60 DUSTY GREY
REP:DON TEJELO;(504)258-9944

PFT3 – STAFF AREAS
DISTRIBUTOR:BPI
MANUFACTURER: ANATOLIA
PATTERN:DAVENPORT
COLOR:EARTH
FINISH: MATTE
SIZE:12" X 24"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE; 60 DUSTY GREY
REP:DAINE COVEY; (601)500-0197

PFT4 – CHAPEL FLOOR
DISTRIBUTOR:BPI
MANUFACTURER:MILESTONE
SERIES:WOOD WOOD
PATTERN: CASSETTONE DECOR 2
COLOR:HONEY/NUT 1100840
FINISH: MATTA
SIZE: 24" X 45"
INSTALLATION:SEE FLOOR PATTERN SHEET
GROUT:LATICRETTE; 90 LIGHT PEWTER
REP:DAINE COVEY; (601)500-0197

BASE:

RB – RUBBER BASE

RB1 – SCULPTED BASE
MANUFACTURER: JOHNSONITE
SERIES: MILLWORK
PATTERN:REVEAL
COLOR: 469 MYSTIFY
HEIGHT: 6"

RB2 – RUBBER BASE
MANUFACTURER: JOHNSONITE
PRODUCT: TIGHTLOCK RESILIENT
COLOR: 469 MYSTIFY
HEIGHT: 6 $\frac{3}{4}$"

IB – INTERGAL BASE

IB1 – SV1 BASE
MANUFACTURER: MANNINGTON
SERIES: BIOSPEC MD HOMOGENEOUS SHEET
COLOR: FLINT 15384
HEIGHT: SEE ELEVATIONS
REP: BO BROOKSBANK;(901)237-9292

IB2 – SV2 BASEL
MANUFACTURER: MANNINGTON
SERIES: BIOSPEC MD HOMOGENEOUS SHEET
COLOR: SALT 15421
HEIGHT: SEE ELEVATIONS
REP: BO BROOKSBANK;(901)237-9292

IB3 – KITCHEN BASE
MANUFACTURER: ALTRO
PRODUCT: ALTRO STRONGHOLD 30
COLOR:MONSOON – K30153
THICKNESS:3MM
HEIGHT:SEE INTERIOR ELEVATIONS

PTB – PORCELAIN TILE BASE

PTB1 – LOBBY RESTROOM FLOORS
DISTRIBUTOR:CONCEPT SURFACES
PATTERN:BOTTEGA
COLOR:GREY LIGHT
SIZE:6" X 24"
GROUT:LATICRETTE;78 STERLING SILVER
REP:DON TEJELO; (504)258-9944

PTB2 – PATIENT RESTROOM FLOORS
DISTRIBUTOR:CONCEPT SURFACES
PATTERN: BOTTEGA
COLOR: OLIVE GREY
FINISH:MATTE
SIZE:6" X 24"
GROUT:LATICRETTE; 60 DUSTY GREY
REP:DON TEJELO;(504)258-9944

PTB3 – STAFF AREAS
DISTRIBUTOR:BPI
MANUFACTURER: ANATOLIA
PATTERN:DAVENPORT
COLOR:EARTH
FINISH:MATTE
SIZE:6" X 24"
GROUT:LATICRETTE; 60 DUSTY GREY
REP:DAINE COVEY; (601)500-0197

PAINT:

P – PAINT

P1 – GENERAL PAINT COLOR
MANUFACTURER:BENJAMIN MOORE
COLOR:MOONSHINE 2140-60
FINISH:EGG SHELL

P2 – BLUE ACCENT
MANUFACTURER:BENJAMIN MOORE
COLOR:NIMBUS GRAY 2131-50
FINISH:EGG SHELL

P3 – BLUE/GREY ACCENT
MANUFACTURER:BENJAMIN MOORE
COLOR:GULL WING GRAY 2134-50
FINISH:EGG SHELL

P4 – GRAY ACCENT
MANUFACTURER:BENJAMIN MOORE
COLOR:SEA HAZE 2137-50
FINISH:EGG SHELL

P5 – DARK BLUE ACCENT
MANUFACTURER:BENJAMIN MOORE
COLOR:SMOKESTACK GRAY 2131-40
FINISH:EGG SHELL

P6 – ACCENT GYP. CEILING COLOR
MANUFACTURER:BENJAMIN MOORE
COLOR: SIMPLY WHITE OC-117
FINISH:FLAT

P7 – CHAPEL CEILING COLOR
MANUFACTURER:BENJAMIN MOORE
COLOR: WINTER WHITE OC-21
FINISH:FLAT

P8 – CHAPEL WALL COLOR
MANUFACTURER:BENJAMIN MOORE
COLOR: WINTER WHITE OC-21
FINISH: EGG SHELL

P9 – GENERAL PAINT COLOR – EPOXY
MANUFACTURER:BENJAMIN MOORE
COLOR:MOONSHINE 2140-60
FINISH:EPOXY

P10 – BLUE ACCENT EPOXY
MANUFACTURER:BENJAMIN MOORE
COLOR:NIMBUS GRAY 2131-50
FINISH:EPOXY

WALL TILE:

PWT – PORCELAIN WALL TILE

PWT1 – LOBBY RESTROOM WALLS
DISTRIBUTOR: BPI
MANUFACTURER: AMERICAN OLEAN
PATTERN:DEOLOGY
COLOR:LASA BEIGE
FINISH:POLISHED
SIZE:12" X 24"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE;90 LIGHT PEWTER
SCHLUTER: QUADEC; ANODIZED ALUMINUM, SATIN
REP:DAINE COVEY; (601)500-0197

PWT2 – PATIENT/STAFF RESTROOM WALLS
DISTRIBUTOR: BPI
MANUFACTURER: ANATOLIA
PATTERN:MARLOW
COLOR:CLOUD
FINISH:GLOSSY
SIZE:3" X 12"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE;78 STERLING SILVER
SCHLUTER: QUADEC; ANODIZED ALUMINUM, SATIN
REP:DAINE COVEY; (601)500-0197

PWT3 – PATIENT RESTROOM WALLS
DISTRIBUTOR: BPI
MANUFACTURER: ANATOLIA
PATTERN:MARLOW
COLOR:MIST
FINISH:GLOSSY
SIZE:3" X 6"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE;78 STERLING SILVER
SCHLUTER: QUADEC; ANODIZED ALUMINUM, SATIN
REP:DAINE COVEY; (601)500-0197

PWT4 – LOBBY ACCENT WALLS
DISTRIBUTOR: BPI
MANUFACTURER: ANATOLIA
PATTERN:MAYFAIR
COLOR:SUAVE BIANCO
FINISH:MATTE
SIZE:16" X 32"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE;78 STERLING SILVER
REP:DAINE COVEY; (601)500-0197

PWT5 – ACCENT TILES
DISTRIBUTOR:CONCEPT SURFACES
PATTERN: BOTTEGA
COLOR: OLIVE GREY
FINISH:SEMI-POLISGED
SIZE:12" X 24"
INSTALLATION:RUNNING BOND
GROUT:LATICRETTE; 60 DUSTY GREY
REP:DON TEJELO;(504)258-9944

PWT6 – CHAPEL ACCENT
DISTRIBUTOR: BPI
MANUFACTURER: ANATOLIA
PATTERN: STELO BIANCO MARBLE
PRODUCT: MOSAICS; RANDOM STRIP POLISHED 76-473
GROUT: LATICRETTE; 90 LIGHT PEWTER
REP:DAINE COVEY; (601)500-0197

WALL PROTECTION:

WPP – WALL PROTECTION PANEL

WWP1 – GENERAL
MANUFACTURER: INPRO
COLOR: SHARKSKIN 0350

WWP2 – SOLID
MANUFACTURER: INPRO
COLOR: GRAYSTONE 0151

WPP3 – ACCENT
MANUFACTURER: INPRO
COLOR: BLUE MIST 0324

2CG – CORNER GAURD

2CG – GENERAL
MANUFACTURER: INPRO
COLOR: SHARKSKIN 0350

HR/BR – HANDRAIL / BUMPER RAIL

HR/BR – GENERAL
MANUFACTURER: INPRO
COLOR: SHARKSKIN 0350

MILLWORK:

PL – PLASTIC LAMINATE

PL1 – WOOD LOOK; CABINETS
MANUFACTURER:FORMICA
COLOR: WALNUT RIFTWOOD 9283-NG
FINISH:NATURAL GRAIN FINISH
GRAIN: SEE INTERIOR ELEVATIONS

PL2 – COUNERTOPS
MANUFACTURER:FORMICA
COLOR: WHITE TWILL 9285-58
FINISH: INFINITI
GRAIN: RUN DIRECTION OF COUNTER

PL3 – LOBBY RESTROOM
MANUFACTURER: FORMICA
COLOR: NEUTRAL TWILL
FINISH: INFINITI
GRAIN: RUN DIRECTION OF COUNTER

PL4 – LAB COUNTER TOP
MANUFACTURER:FORMICA
COLOR: BLACK 909
FINISH: CHEMTOP (CT)

SS – SOLID SURFACE

SS1 – GENERAL TRANSACTION AND WET AREA COUNTERTOPS
MANUFACTURER: CORIAN
COLOR: WHITE JASMINE

SS2 – RECEPTION DESK
MANUFACTURER: CAESAR STONE
COLOR: 5131CALACATTA NUVO

SS3 – LOBBY RESTROOM COUNTERTOPS
MANUFACTURER: PRESTIGE STONE
DISTRIBUTOR: BPI
COLOR: CREAMY FROTH PSG201

RC – RESIN COUNTERTOP

RC1 – RESIN COUNTERTOP
LOCATION: LABS
SEE SPEC FOR INFORMATION

ACCESSORIES:

TP – TOILET PARTITIONS

TP1 – LOBBY RESTROOMS
MANUFACTURER: SCRANTON PRODUCTS
PRODUCT: HINY HIDERS
COLOR: CONCRETE
FINISH: ORANGE PEEL

SB – SHOWER BASE

SB1 – SHOWER BASES
MANUFACTURER: INPRO
PRODUCT: BIOPRISM SOLID SURFACE
COLOR: POLAR ICE P9080

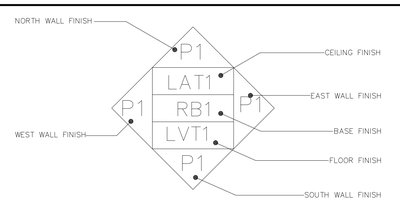
SP – SHOWER PANELS

SP1 – SHOWER PANELS
MANUFACTURER: INPRO
PRODUCT: BIOPRISM SOLID SURFACE
COLOR: ARCTIC SNOW P9780

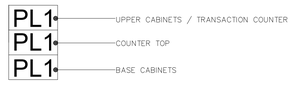
GENERAL NOTES:

1. ALL TRIM TO BE PAINTED IN A SEMI-GLOSS FINISH TO MATCH ADJACENT PAINT COLOR
2. ALL GYP. CEILINGS TO BE PAINTED P1 IN A FLAT FINISH UNLESS OTHERWISE NOTED ON REFLECTED CEILING PLAN
3. REFER TO FLOOR PATTERN SHEETS FOR FLOOR PATTERNS AND DIRECTIONS (D.O.P.)
4. PROVIDE SCHLUTER TRANSITIONS FOR ALL FLOORING MATERIAL CHANGES
5. ALL PAINT COLORS MUST BE APPROVED BY ARCHITECT ON JOB SITE, PROVIDE 3'X3' SWATCH OF EACH COLOR
6. USE WWP1 AS THE STANDERED FOR WWP UNLESS OTHERWISE NOTED

FINISH TAG LEGEND:



MILLWORK TAG LEGEND:



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JANUARY 08, 2020 – ADDENDUM 3

Project No. 18015 Revisions: ⚠
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP
Checked: KAO

– FLOOR PATTERN PLAN – PART "A"

Sheet Number:

A901

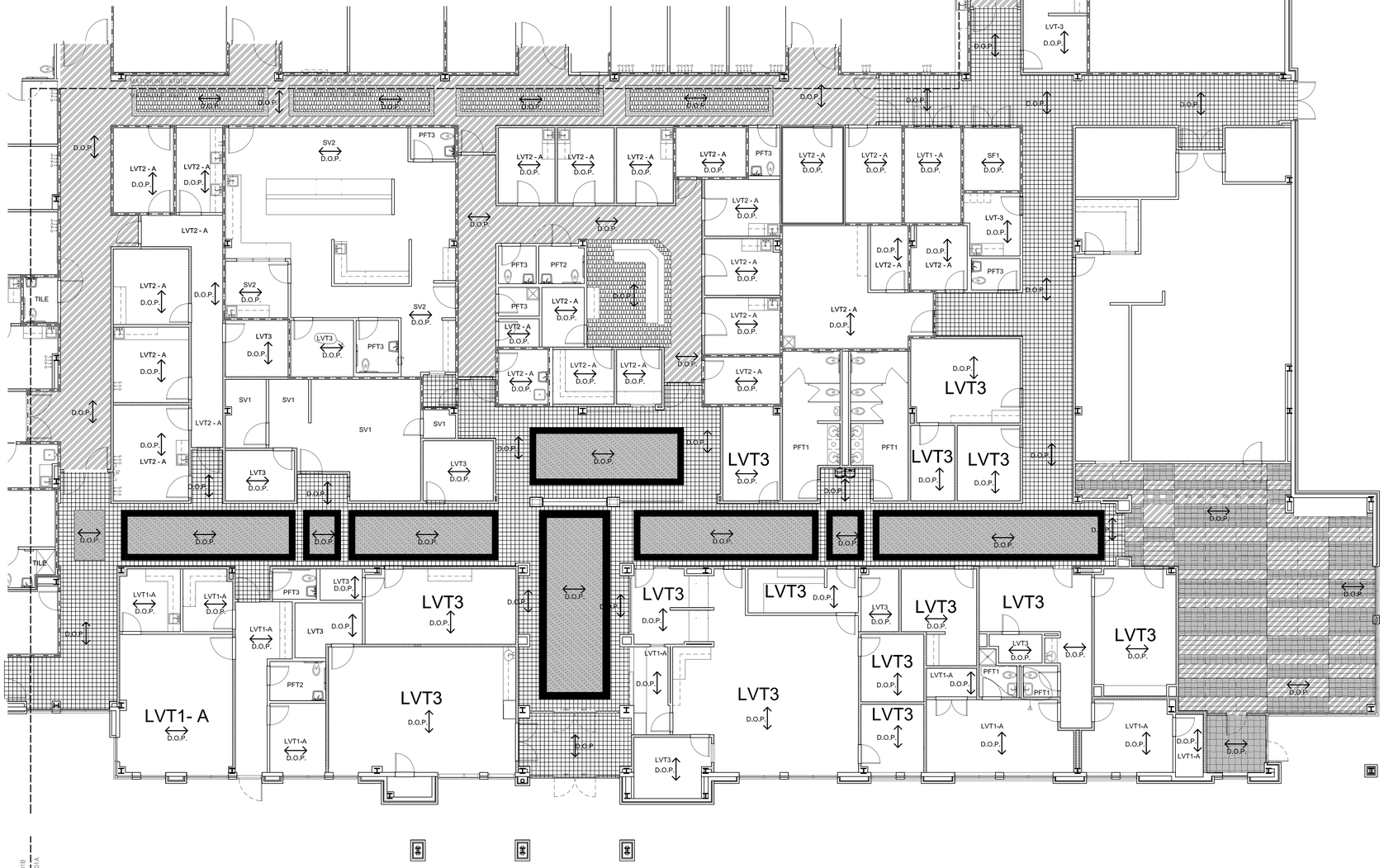
REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

1" =1'-0" GRAPHIC SCALE
3" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
3" =1'-0" GRAPHIC SCALE
3" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE

FLOOR PATTERN LEGEND

LVT1 – A MANNINGTON; NATURES PATHS; VIA; TBS	LVT3 – WOVEN LVT PATCRAFT; 1483V PAINTED WEFT; 00500 HEDDLE
LVT1 – B MANNINGTON; NATURES PATHS; VIA; TBS	SV1 – DARK SHEET VINLY MANNINGTON; BIOSPEC; FLINT
LVT1 – C MANNINGTON; NATURES PATHS; VIA; TBS	SV2 – LIGHT SHEET VINLY MANNINGTON; BIOSPEC; SALT
LVT2 – A MOHAWK; LINEATE; FIGURED 948 – GREY	SF – SAFETY FLOOR ALTRO; MONSOON
LVT2 – B MOHAWK; LINEATE;MAKER 857 – BROWN	S.C.– SEALED CONCRETE
LVT2 – C MOHAWK; LINEATE;CORD 957 – CHARCOAL	PFT1 – LOBBY RESTROOMS BOTTEGA; GREY LIGHT; MATTE; RUNNING BOND
LVT2 – D MOHAWK; LINEATE; RIDGED 588 – BLUE	PFT2 – PATIENT RESTROOMS BOTTEGA; OLIVE GREY; MATTE; RUNNING BOND
	PFT3 – STAFF AREA FLOORS ANATOLIA; DAVENPORT; EARTH;MATTE; RUNNING BOND
	PFT4 – CHAPEL FLOOR MILESTONE; CASSETTONE DECOR 2; HONEY/NUT;SEE PLAN
1. PROVIDE SCHLUTER FLOORING TRANSITIONS AT ALL FLOORING MATERIAL AND THICKNESS CHANGES	

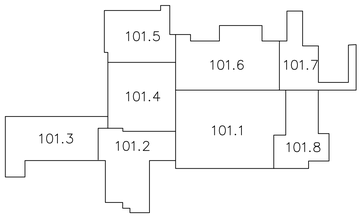


A901A — FLOOR PATTERN PLAN – PART "A"
SCALE : ? " = 1'-0"

NORTH

EXISTING NURSING HOME

EXISTING HOSPITAL



KEY PLAN NO SCALE

REFER TO ENLARGED PLAN SHEETS NOTED ABOVE FOR INTERIOR WALL DIMENSIONS AND NOTES.

LIFE SAFETY/WALL LEGEND

SYMBOL	DESCRIPTION
	2–HOUR FIRE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	2–HOUR FIRE/SMOKE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	1–HOUR FIRE WALL: U.L. DES. NO. U419 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" TYPE "X" GYPSUM BOARD EACH SIDE, EXTENDED TO 1 HR FIRE–RATED CEILING ASSEMBLY. NOTE: IN ROOMS WITHOUT FIRE–RATED CEILING, EXTEND WALLS TO DECK.3" SOUND ATTENUATION BATT TO CEILING.
NOTE: BUILD ALL RATED WALLS IN STRICT ACCORDANCE WITH UL DESIGN.	
	NON–RATED 5" NOMINAL WALL (4⅞" ACTUAL) [SOUND–INSULATED] 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO 8" ABOVE CEILING WITH 3" SOUND BATTS
	NON–RATED 5" NOMINAL WALL (4⅞" ACTUAL) [SOUND–INSULATED] 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES, PENETRATIONS, ETC. WITH ¼" (MIN) ROUND BEAD OF ACOUTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET J678)
	NON–RATED 7" NOMINAL WALL (6⅞" ACTUAL) [SOUND–INSULATED] 3⅝" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES, PENETRATIONS, ETC. WITH ¼" (MIN) ROUND BEAD OF ACOUTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET J678)
NOTE: MAJORITY OF ROOMS HAVE 5" NOMINAL WALLS. HOWEVER REFER TO PLAN SHEETS FOR WALLS REQUIRED TO BE 6" OR 7" NOMINAL.	
NOTE: ALL ROOMS TO HAVE 3" OF SOUND ATTENUATION BATTS AROUND PERIMETER OF L.A.T. CEILINGS (EXCLUDING JANITORS AND HOUSEKEEPING CLOSETS)	

F.E.C. SEMI–RECESSED	F.E.C. EXT. SURF. MOUNTED	F.E. WALL MOUNTED	FIRE EXTINGUISHER CABINETS MUST BE LOCATED SO TRAVEL DISTANCE TO EXTINGUISHER IS LESS THAN 75 FEET (EXT. CABINET TO BE STAINLESS STL)

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Project No: 18015 Revisions: Δ JANUARY 08, 2020 – ADDENDUM 3
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP
Checked: KAO

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : • A901A – FLOOR PATTERN PLAN – PART "A"

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL RIPLEY, MISSISSIPPI PN 18015

EXISTING FACILITY

FLOOR PATTERN LEGEND

- LVT1 – A — MANNINGTON; NATURES PATHS; VIA; TBS
- LVT1 – B — MANNINGTON; NATURES PATHS; VIA; TBS
- LVT1 – C — MANNINGTON; NATURES PATHS; VIA; TBS
- LVT2 – A — MOHAWK; LINEATE; FIGURED 948 – GREY
- LVT2 – B — MOHAWK; LINEATE;MAKER 857 – BROWN
- LVT2 – C — MOHAWK; LINEATE;CORD 957 – CHARCOAL
- LVT2 – D — MOHAWK; LINEATE; RIDGED 588 – BLUE

LVT3 – WOVEN LVT
PATCRAFT; 1483V PAINTED WEFT; 00500 HEDDLE

SV1 – DARK SHEET VINLY
MANNINGTON; BIOSPEC; FLINT

SV2 – LIGHT SHEET VINLY
MANNINGTON; BIOSPEC; SALT

SF – SAFETY FLOOR
ALTRO; MONSOON

S.C.– SEALED CONCRETE

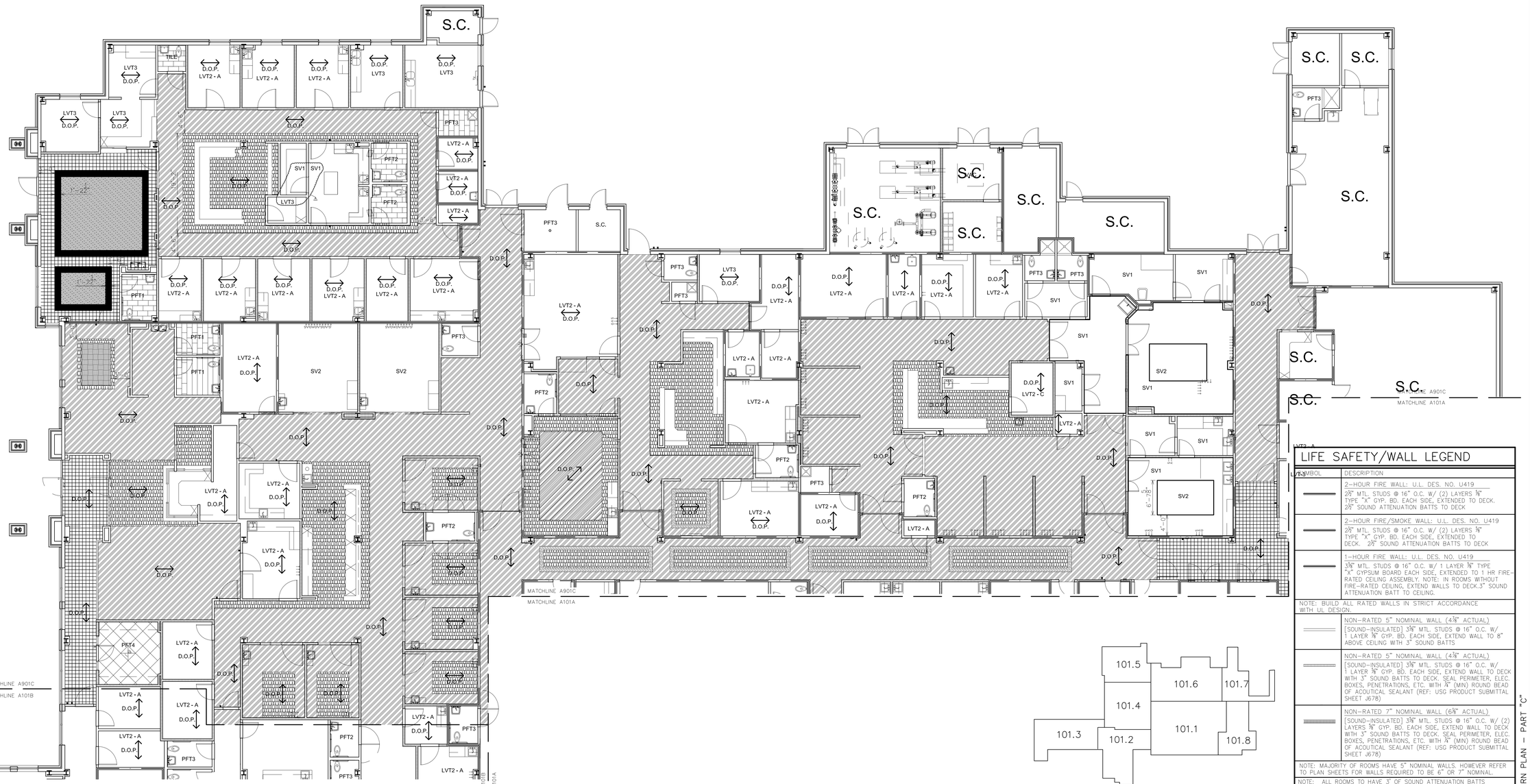
PFT1 – LOBBY RESTROOMS
BOTTEGA; GREY LIGHT; MATTE; RUNNING BOND

PFT2 – PATIENT RESTROOMS
BOTTEGA; OLIVE GREY; MATTE; RUNNING BOND

PFT3 – STAFF AREA FLOORS
ANATOLIA; DAVENPORT; EARTH;MATTE; RUNNING BOND

PFT4 – CHAPEL FLOOR
MILESTONE; CASSETTONE DECOR 2; HONEY/NUT;SEE PLAN

1. PROVIDE SCHLUTER FLOORING TRANSITIONS AT ALL FLOORING MATERIAL AND THICKNESS CHANGES



LVT3
A901C
FLOOR PATTERN PLAN – PART "C"
SCALE : ? " = 1'–0"

NORTH

GRAPHIC SCALE: 1/8" = 1'–0"

KEY PLAN — NO SCALE

REFER TO ENLARGED PLAN SHEETS NOTED ABOVE FOR INTERIOR WALL DIMENSIONS AND NOTES.

LIFE SAFETY/WALL LEGEND

SYMBOL	DESCRIPTION
	2–HOUR FIRE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	2–HOUR FIRE/SMOKE WALL: U.L. DES. NO. U419 2½" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2½" SOUND ATTENUATION BATTS TO DECK
	1–HOUR FIRE WALL: U.L. DES. NO. U419 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" TYPE "X" GYPSUM BOARD EACH SIDE, EXTENDED TO 1 HR FIRE–RATED CEILING ASSEMBLY. NOTE: IN ROOMS WITHOUT FIRE–RATED CEILING, EXTEND WALLS TO DECK.3" SOUND ATTENUATION BATT TO CEILING.
NOTE: BUILD ALL RATED WALLS IN STRICT ACCORDANCE WITH UL DESIGN.	
	NON–RATED 5" NOMINAL WALL (4⅞" ACTUAL) [SOUND–INSULATED] 3⅝" MTL. STUDS @ 16" O.C. W/ 1 LAYER ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO 8" ABOVE CEILING WITH 3" SOUND BATTS
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	NON–RATED 7" NOMINAL WALL (6⅞" ACTUAL) [SOUND–INSULATED] 3⅝" MTL. STUDS @ 16" O.C. W/ (2) LAYERS ⅝" GYP. BD. EACH SIDE, EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES, PENETRATIONS, ETC. WITH ¼" (MIN) ROUND BEAD OF ACOUTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET J678)
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NOTE: ALL ROOMS TO HAVE 3" OF SOUND ATTENUATION BATTS AROUND PERIMETER OF L.A.T. CEILINGS (EXCLUDING JANITORS AND HOUSEKEEPING CLOSETS)	

F.E.C. SEMI–RECESSED	F.E.C. EXT. SURF. MOUNTED	F.E. WALL MOUNTED	FIRE EXTINGUISHER CABINETS MUST BE LOCATED SO TRAVEL DISTANCE TO EXTINGUISHER IS LESS THAN 75 FEET (EXT. CABINET TO BE STAINLESS STL)

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Date: 4 DECEMBER 2019
Drawn:FBH; MH; MP
Checked: KAO

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : • – FLOOR PATTERN PLAN – PART "C"

A901C

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN: 18015

?" =1'-0" GRAPHIC SCALE | ?" =1'-0" GRAPHIC SCALE | ?" =1'-0" GRAPHIC SCALE | ?" =1'-0" GRAPHIC SCALE | 1" =1'-0" GRAPHIC SCALE | 1?" =1'-0" GRAPHIC SCALE | 3" =1'-0" GRAPHIC SCALE

A901.1 FINISH FLOOR PLAN – PART "1"

SCALE : ? " = 1'-0"

NORTH

GRAPHIC SCALE: 1/4" = 1'-0"

NOTE:
WHERE WALL TILE IS SCHEDULED (PWT) THE TILE WILL EXTEND TO FINISHED FLOOR (PWB). THERE WILL BE NO RUBBER BASE INSTALLED.

LIFE SAFETY/WALL LEGEND

SYMBOL	DESCRIPTION
	2–HOUR FIRE WALL: U.L. DES. NO. U419 2x6 @ 16" O.C. W/ (2) LAYERS 5/8" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2R" SOUND ATTENUATION BATTS TO DECK
	2–HOUR FIRE/SMOKE WALL: U.L. DES. NO. U419 2R" MTL. STUDS @ 16" O.C. W/ (2) LAYERS 5/8" TYPE "X" GYP. BD. EACH SIDE, EXTENDED TO DECK. 2R" SOUND ATTENUATION BATTS TO DECK
	1–HOUR FIRE WALL: U.L. DES. NO. U419 3R" MTL STUDS @ 16" O.C. W/ 1 LAYER 5/8" TYPE "X" GYPSUM BOARD EACH SIDE, EXTENDED TO 1 HR FIRE-RATED CEILING. EXTEND WALLS TO DECK.3" SOUND ATTENUATION BATT TO CEILING.
	NOTE: BUILD ALL RATED WALLS IN STRICT ACCORDANCE WITH UL DESIGN.
	NON–RATED 5" NOMINAL WALL (4R" ACTUAL) [SOUND–INSULATED] 3R" MTL. STUDS @ 16" O.C. W/ 1 LAYER 5/8" GYP. BD. EACH SIDE, EXTEND WALL TO 8" ABOVE CEILING WITH 3" SOUND BATTS
	NON–RATED 5" NOMINAL WALL (4R" ACTUAL) [SOUND–INSULATED] 3R" MTL. STUDS @ 16" O.C. W/ 1 LAYER 5/8" GYP. BD. EACH SIDE. EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES PENETRATIONS, ETC. WITH 5/8" (MIN.) ROUND BEAD OF ACOUSTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET J678)
	NON–RATED 7" NOMINAL WALL (6R" ACTUAL) [SOUND–INSULATED] 3R" MTL. STUDS @ 16" O.C. W/ (2) LAYERS 5/8" GYP. BD. EACH SIDE. EXTEND WALL TO DECK WITH 3" SOUND BATTS TO DECK. SEAL PERIMETER, ELEC. BOXES PENETRATIONS, ETC. WITH 5/8" (MIN.) ROUND BEAD OF ACOUSTICAL SEALANT (REF: USG PRODUCT SUBMITTAL SHEET J678)
	NOTE: MAJORITY OF ROOMS HAVE 5" NOMINAL WALLS. HOWEVER REFER TO PLAN SHEETS FOR WALLS REQUIRED TO BE 6" OR 7" NOMINAL
	FIRE EXTINGUISHER CABINETS AND HOUSEKEEPING CLOSETS)
F.E.C. SEMI–RECESSED	
F.E.C. EXT. SURF. MOUNTED	MUST BE LOCATED SO TRAVEL DISTANCE TO F.E.C. IS LESS THAN 75 FEET (EXT. CABINET TO BE STAINLESS STL)
F.E.C. WALL MOUNTED	

– FLOOR PLAN – PART "1"

Sheet Number : A901.1

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Project No: 18015 Revisions: ⚠ JANUARY 08, 2020 – ADDENDUM 3
Date: 4 DECEMBER 2019
Drawn: FBH, MH, MP, AR
Checked: KAO

Kenneth Allen Oubre — Registered Architect — MISSISSIPPI

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REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

? =1'-0" GRAPHIC SCALE | ? =1'-0" GRAPHIC SCALE | ? =1'-0" GRAPHIC SCALE | ? =1'-0" GRAPHIC SCALE | 1" =1'-0" GRAPHIC SCALE | 1?" =1'-0" GRAPHIC SCALE | 3" =1'-0" GRAPHIC SCALE

A901.6

FINISH FLOOR PLAN – PART "6"

SCALE : ? " = 1'-0"

NORTH

GRAPHIC SCALE: 1/4" = 1'-0"

NOTE:
WHERE WALL TILE IS SCHEDULED (PWT) THE TILE WILL EXTEND TO FINISHED FLOOR (PWB). THERE WILL BE NO RUBBER BASE INSTALLED.

– FLOOR PLAN – PART "6"

Sheet Number :

A901.6

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

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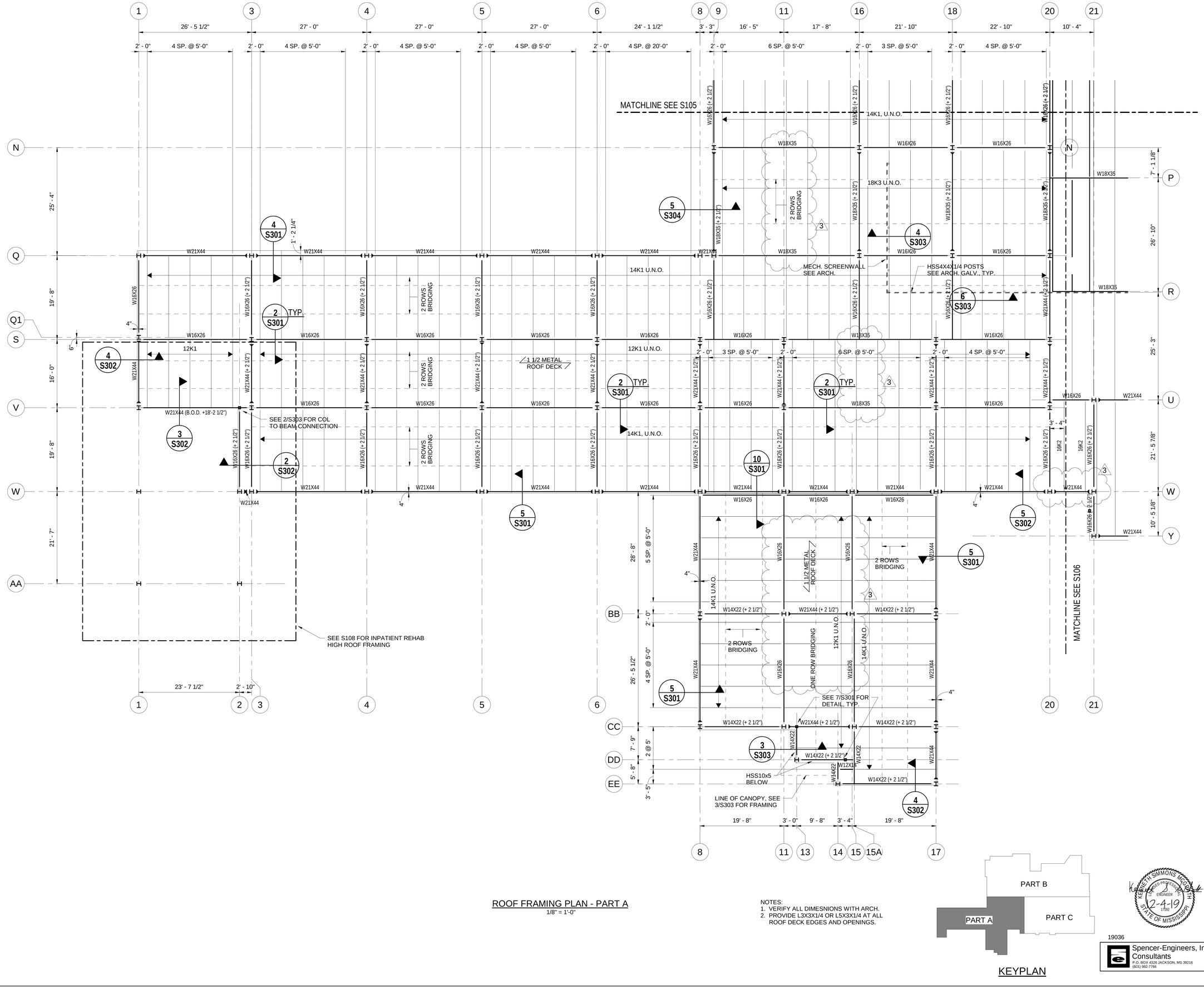

ROOF FRAMING PLAN - PART A
1/8" = 1'-0"

NOTES:
1. VERIFY ALL DIMESNIONS WITH ARCH.
2. PROVIDE L3X3X1/4 OR L5X3X1/4 AT ALL ROOF DECK EDGES AND OPENINGS.

KEYPLAN

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Project No: 18015
Date: 4 DECEMBER 2019
Drawn: JSB
Checked: KSM

Revisions: 3 Date 3

REPLACEMENT FACILITY FOR
TIPPAH CO. HOSPITAL
RIPLEY, MISSISSIPPI

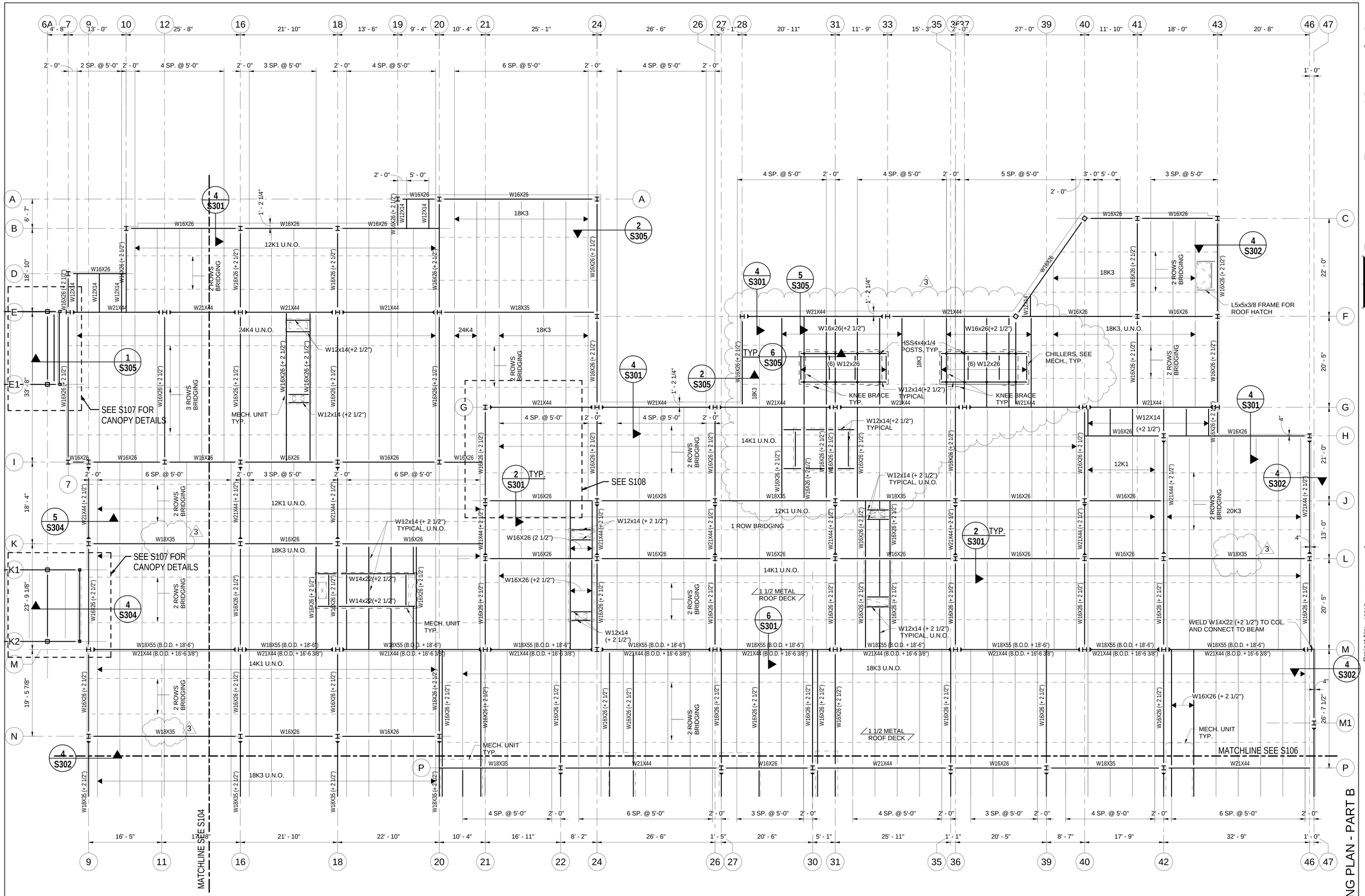
ROOF FRAMING PLAN - PART A

Sheet Number : S104 of Sheets

KENNETH SIMMONS MCGOWAN
LICENSED PROFESSIONAL ENGINEER
12-4-19
17592
STATE OF MISSISSIPPI

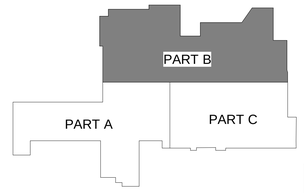
19036

Spencer-Engineers, Inc.
Consultants
P.O. BOX 4328 JACKSON, MS 39216
(601) 982-7766



ROOF FRAMING PLAN - PART B
1/8" = 1'-0"

NOTES:
1. VERIFY ALL DIMENSIONS WITH ARCH.
2. COORDINATE WITH MECH. FOR ALL DIMENSIONS NOT SHOWN AT MECH. UNITS.
3. PROVIDE L3X3X1/4 OR L5X3X1/4 AT ALL ROOF DECK EDGES AND OPENINGS



KEYPLAN

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Project No: 18015 Revisions: 3 Date 3
Date: 4 DECEMBER 2019
Drawn: JSB
Checked: KSM

REPLACEMENT FACILITY FOR TIPPAH CO. HOSPITAL
RIPLEY, MISSISSIPPI

ROOF FRAMING PLAN - PART B

Sheet Number: S105 of Sheets

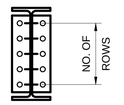
KENNETH SIMMONS MOORE III LICENSED PROFESSIONAL ENGINEER 12-4-19 17092 STATE OF MISSISSIPPI

19036

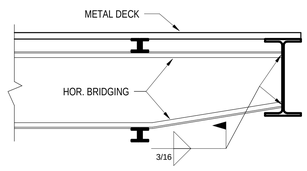
Spencer-Engineers, Inc.
Consultants
P.O. BOX 4328 JACKSON, MS 39216
(601) 982-7766

DOUBLE ANGLE BOLTED CONNECTION TYPICAL UNLESS SHOWN OTHERWISE

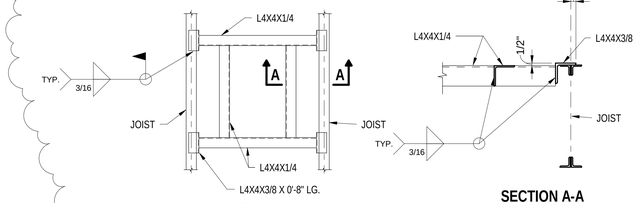
BEAM SIZE	NO. OF ROWS	BOLT SIZE	MIN. ANGLE THICKNESS	REMARKS
W8	2	3/4"	1/4"	
W10	2	3/4"	1/4"	
W12	3	3/4"	1/4"	
W14	3	3/4"	5/16"	
W16	4	3/4"	5/16"	
W18	5	3/4"	5/16"	
W21	6	3/4"	5/16"	
W24	6	3/4"	5/16"	
W27	7	3/4"	5/16"	
W30	8	3/4"	5/16"	
W36	10	3/4"	5/16"	



DETAIL



TYPICAL HOR. BRIDGING TO BEAM CONN.

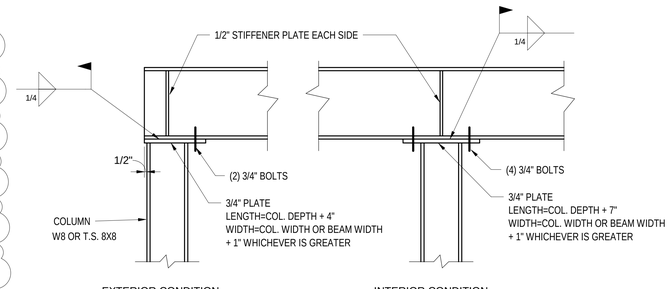


PLAN **SECTION A-A**

NOTE:
SEE MECH. / ARCH FOR OPENING SIZE

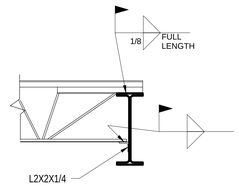
FRAMING FOR TYPICAL ROOF OPENINGS AND MECH. UNIT SUPPORTS

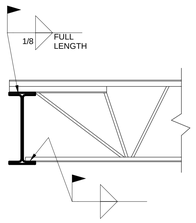
PROVIDE AS NOTED ON THE DRAWINGS AND AT ALL MECH. UNITS OVER 200 LBS.

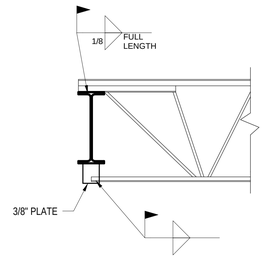


7 / S301 1" = 1'-0" **TYPICAL BEAM TO COLUMN CONNECTION AT ROOF**

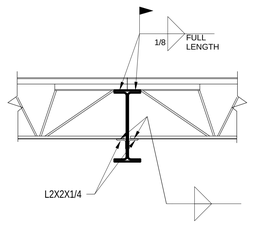
SIMILAR WHERE COLUMN TURN 90°

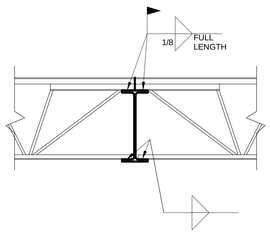


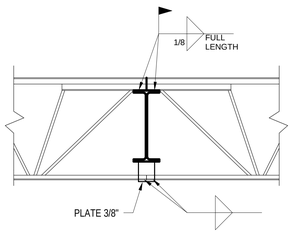




1 / S301 3 EXTERIOR CONDITIONS 1" = 1'-0"



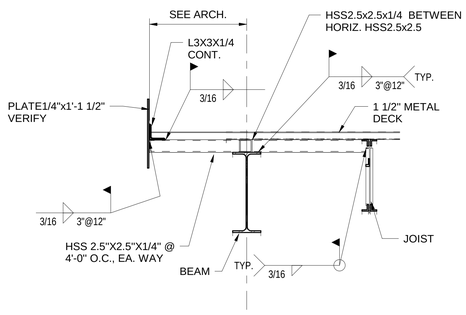




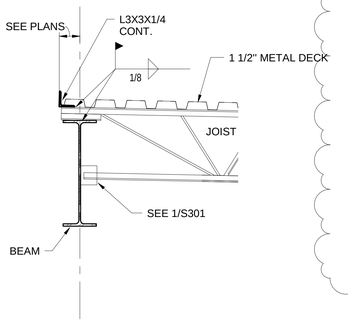
2 / S301 3 INTERIOR CONDITIONS 1" = 1'-0"

JOIST NOTES

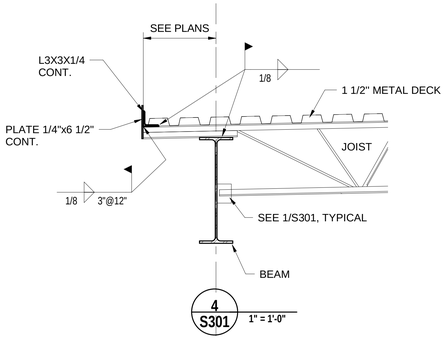
1. CONNECTIONS TYPICAL AT FLOOR (CONCRETE AND DECK NOT SHOWN) AND ROOF (DECK NOT SHOWN).
2. BOTTOM CHORD SHALL NOT BE WELDED UNTIL DEAD LOADS ARE APPLIED. THIS INCLUDES ROOFING, SLAB, BLOCK WALLS, ETC.
3. JOIST SEAT TO BE WELDED FULL LENGTH OF BEARING, BOTH SIDES.



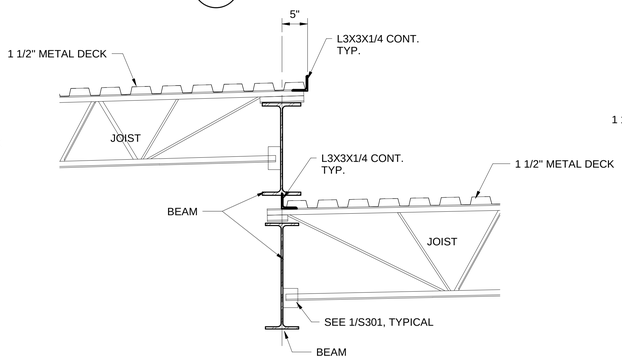
3 / S301 1" = 1'-0"



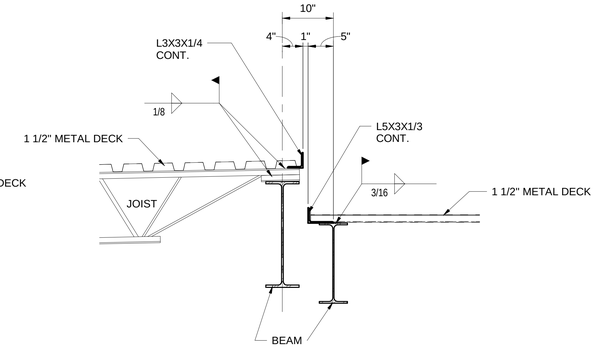
5 / S301 1" = 1'-0"



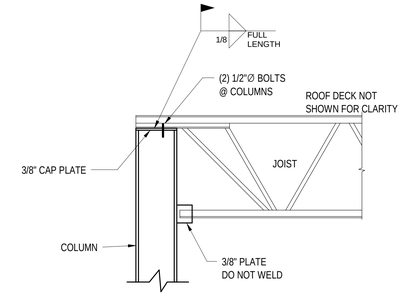
4 / S301 1" = 1'-0"



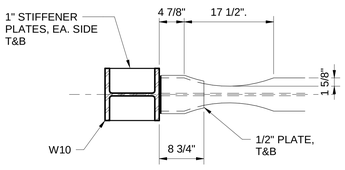
6 / S301 1" = 1'-0"



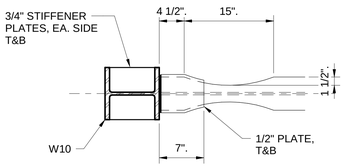
10 / S301 1" = 1'-0"



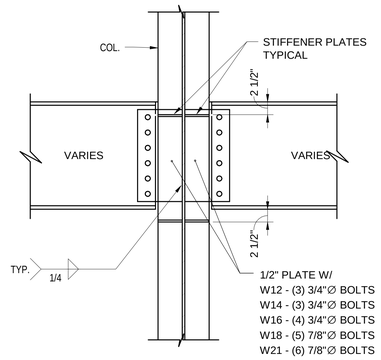
TYPICAL JOIST TO COLUMN CONNECTION

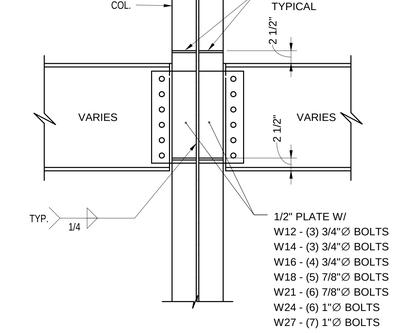


TOP VIEW - W21x44



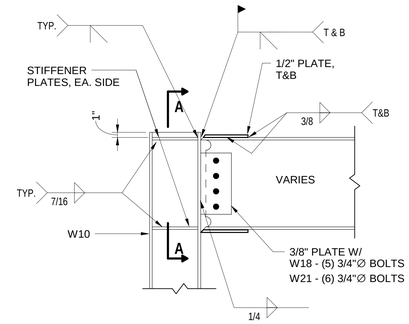
TOP VIEW - W18x35





SECTION A-A (2) CONDITIONS SHOWN

TYPICAL MOMENT CONNECTION



PROTECTED ZONE NOTES

1. THE MOMENT CONNECTION PROTECTED ZONE SHALL BE THE PORTION OF THE BEAM BETWEEN THE FACE OF THE COLUMN AND TEH END OF THE REDUCED BEAM SECTION CUT FARTHEST FROM THE FACE OF THE COL.
2. CONTRACTOR SHALL MARK THIS SECTION WITH A DIFFERENT COLOR PAINT THAN THE PRIMER.
3. WELDED, BOLTED, SCREWED, OR SHOT-IN ATTACHEMENTS FOR PERIMETER EDGE ANGLES, EXTERIOR FACADES, PARTITIONS, DUCT WORK, PIPING, OR OTHER CONSTRUCTION SHALL NOT BE PLACED WITHIN THE PROTECTED ZONE.

3

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Project No: 19015 Revisions: 3 Date 3
Date: 4 DECEMBER 2019
Drawn: JSB
Checked: KSM

STEEL DETAILS

REPLACEMENT FACILITY FOR
TIPPAH CO. HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : S301 of Sheets

KENNETH SIMMONS MCCOY LICENSED PROFESSIONAL ENGINEER 12-4-19 17760 STATE OF MISSISSIPPI

19036

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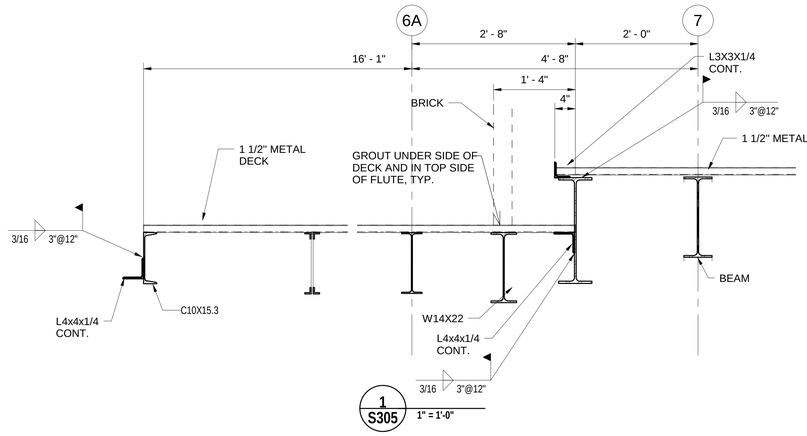
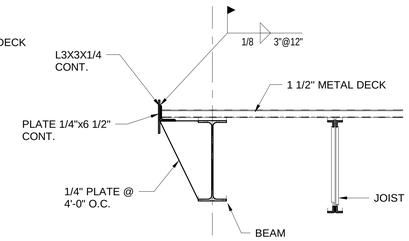
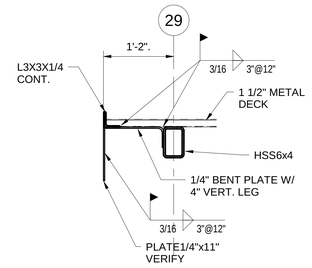
(601) 982-7766



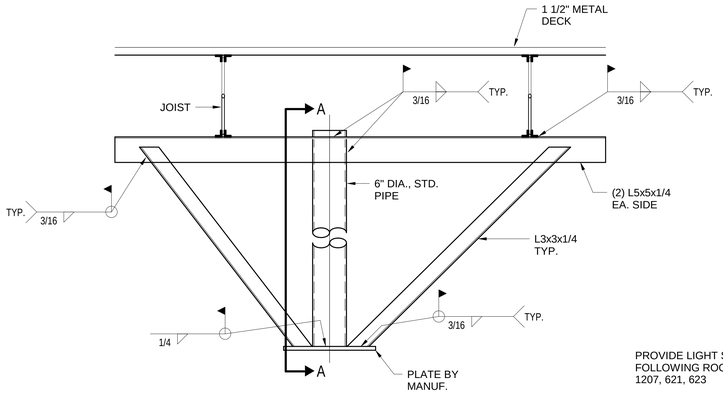
1 S305 1" = 1'-0"

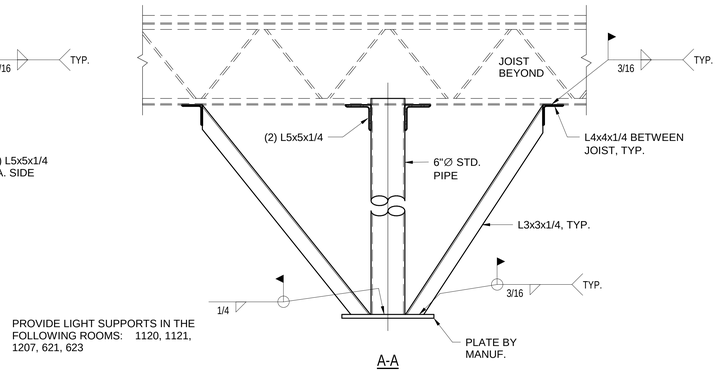


2 S305 1" = 1'-0"



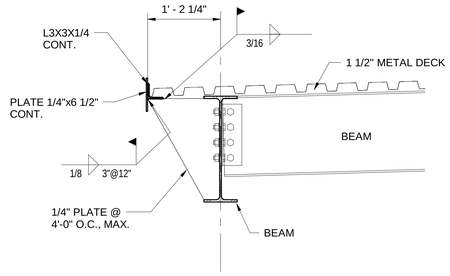
4 S305 1" = 1'-0"





A-A

PROVIDE LIGHT SUPPORTS IN THE FOLLOWING ROOMS: 1120, 1121, 1207, 621, 623

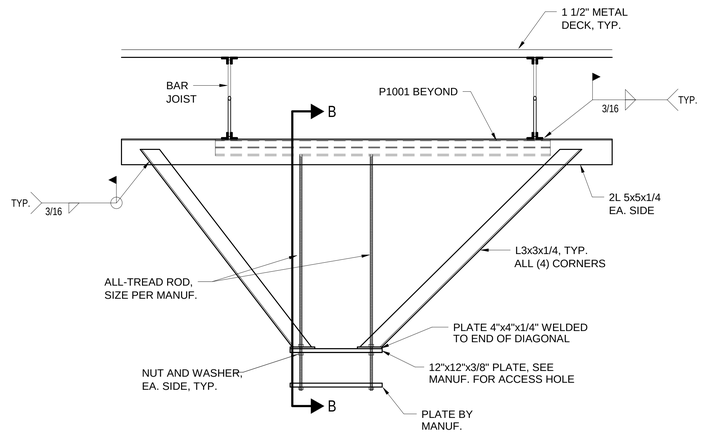


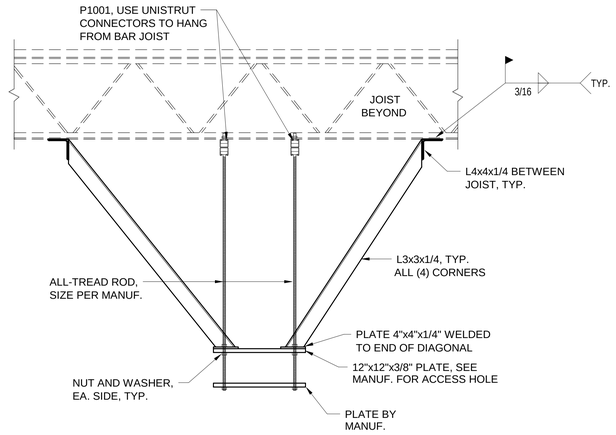
5 S305 1" = 1'-0"

MEDICAL LIGHT SUPPORT DETAILS

1" = 1'-0"

NOTES:
1. VERIFY WITH ARCHITECT ALL LIGHT SUPPORT LOCATIONS.
2. COORDINATE WITH OWNER AND VENDER TO VERIFY DIMENSIONS OF ALL FRAMING.
3. COORDINATE WITH OWNER AND VENDOR FOR ALL NECESSARY FRAMING FOR SUPPORT OF LIGHT. THE CONTRACTOR IS RESPONSIBLE FOR ANY ADDITIONAL FRAMING NECESSARY TO SUPPORT THE EQUIPMENT.





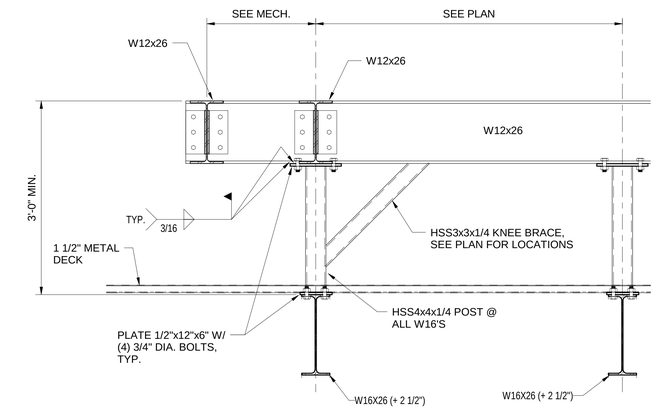
B-B

MEDICAL GAS COLUMN SUPPORT DETAILS

1" = 1'-0"

NOTES:
1. VERIFY WITH ARCHITECT ALL MED GAS SUPPORT LOCATIONS.
2. COORDINATE WITH OWNER AND VENDER TO VERIFY DIMENSIONS OF ALL FRAMING.
3. COORDINATE WITH OWNER AND VENDOR FOR ALL NECESSARY FRAMING FOR SUPPORT OF MED GAS COLUMN. THE CONTRACTOR IS RESPONSIBLE FOR ANY ADDITIONAL FRAMING NECESSARY TO SUPPORT THE EQUIPMENT.

3



TYPICAL ROOF FRAMING DETAIL FOR ACC UNITS

6 S305 1" = 1'-0"

19036

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Project No: 18015 Revisions: 3
Date: 4 DECEMBER 2019
Drawn: JSB
Checked: KSM

STEEL DETAILS

REPLACEMENT FACILITY FOR
TIPPAH CO. HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number: S305 of Sheets

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REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number: P201

- OVERALL MEDICAL GAS PLAN

GSK
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GSK#:111-041

SPECIFIC MED GAS NOTES

MG4	MEDICAL GAS MASTER ALARM PANEL MOUNTED WITH CENTER AT 54" A.F.F. COORDINATE MOUNTING HEIGHT TO BE VISIBLE FROM NURSES STATION. VERIFY MOUNTING HEIGHT AND LOCATION WITH ARCHITECT.

2" OXYGEN UP TO BULK OXYGEN SYSTEM. SEE DETAIL FOR VALVE ARRANGEMENT.

2" MG

EXISTING FACILITY

MER GEN

MRI UNIT

EXISTING FACILITY

EXTEND VACUUM PUMP EXHAUST DISCHARGE PIPING UP THROUGH ROOF TO GOOSENECK TURNED DOWN AT 90 DEG. FINISH SS. PROVIDE SS INSECT SCREEN OVER OPENING.

CAP FOR FUTURE EXTENSION TO NURSING HOME.

MAP MG4

2 1/2"

1 1/4"

1"

MC

1 P201.5

1 P201.4

1 P201.6

1 P201.2

1 P201.3

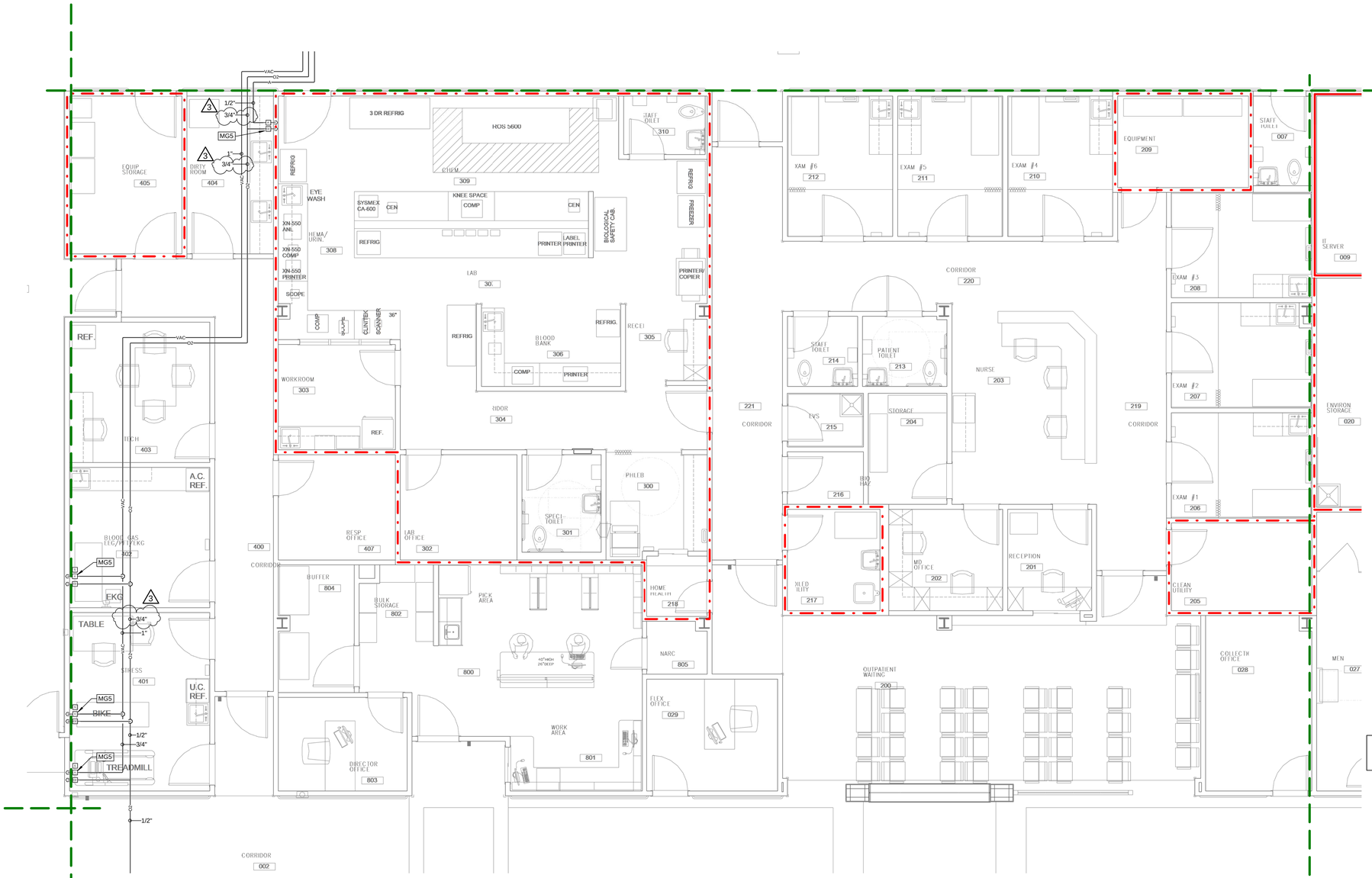
1 P201.1

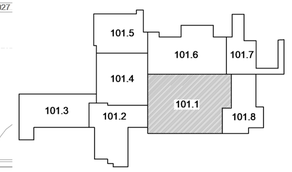
1 P201 1/16" = 1'-0"
OVERALL PLUMBING PLAN (MED GAS)

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

%%132" =1'-0" GRAPHIC SCALE
%%130" =1'-0" GRAPHIC SCALE
%%129" =1'-0" GRAPHIC SCALE
%%131" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
1%%129" =1'-0" GRAPHIC SCALE
3" =1'-0" GRAPHIC SCALE

SPECIFIC MED GAS NOTES	
MG5	TYPICAL MEDICAL GAS PIPING DOWN IN WALL TO WALL INLETS/OUTLETS. SEE PLAN FOR SIZE OF PIPING AND QUANTITY OF OUTLETS. COORDINATE MOUNTING HEIGHT WITH ARCHITECT. OXYGEN, MEDICAL AIR, NITROUS OXIDE BRANCH PIPING SHALL BE 1/2" SIZE UNLESS NOTED OTHERWISE. MEDICAL VACUUM & WAGD BRANCH PIPING SHALL BE 3/4" SIZE UNLESS OTHERWISE NOTED.





1 P201.4 ENLARGED MEDICAL GAS PLAN - PART "4"

1/4" = 1'-0"

3" =1'-0" GRAPHIC SCALE

1⅛"x129" =1'-0" GRAPHIC SCALE

1" =1'-0" GRAPHIC SCALE

⅝"x131" =1'-0" GRAPHIC SCALE

⅝"x129" =1'-0" GRAPHIC SCALE

⅝"x130" =1'-0" GRAPHIC SCALE

⅝"x132" =1'-0" GRAPHIC SCALE

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ENLARGED MEDICAL GAS PLAN - PART "4"

Sheet Number: P201.4

REPLACEMENT FACILITY FOR
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RIPLEY, MISSISSIPPI

SPECIFIC MED GAS NOTES	
MG1	TYPICAL MEDICAL GAS PIPING CONNECTION TO CEILING MOUNTED COLUMN. VERIFY CONNECTION QUANTITY AND SIZES WITH MEDICAL EQUIPMENT MANUFACTURER.
MG2	MEDICAL GAS ZONE VALVE BOX MOUNTED WITH CENTER AT 54" A.F.F. VERIFY ELEVATION DOES NOT CONFLICT WITH HANDRAILS.
MG3	MEDICAL GAS AREA ALARM PANEL MOUNTED WITH CENTER AT 54" A.F.F. COORDINATE MOUNTING HEIGHT TO BE VISIBLE FROM NURSES STATION. VERIFY MOUNTING HEIGHT AND LOCATION WITH ARCHITECT.
MG5	TYPICAL MEDICAL GAS PIPING DOWN IN WALL TO WALL INLETS/OUTLETS. SEE PLAN FOR SIZE OF PIPING AND QUANTITY OF OUTLETS. COORDINATE MOUNTING HEIGHT WITH ARCHITECT. OXYGEN, MEDICAL AIR, NITROUS OXIDE BRANCH PIPING SHALL BE 1/2" SIZE UNLESS NOTED OTHERWISE. MEDICAL VACUUM & WAGD BRANCH PIPING SHALL BE 3/4" SIZE UNLESS OTHERWISE NOTED.
MG6	LOCK IN-LINE SERVICE VALVES IN EITHER OPEN OR CLOSED POSITION WITH COMMONLY KEYED PAD LOCKS. VALVES INSTALLED FOR FUTURE SERVICE SHALL BE LOCKED CLOSED. ALL OTHER VALVES SHALL BE LOCKED OPEN.

3" =1'-0" GRAPHIC SCALE
1½"x129" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
¾"x131" =1'-0" GRAPHIC SCALE
¾"x129" =1'-0" GRAPHIC SCALE
¾"x130" =1'-0" GRAPHIC SCALE
¾"x132" =1'-0" GRAPHIC SCALE

OXYGEN SUPPLY SYSTEM. SEE DETAIL.
NITROUS OXIDE MANIFOLD. SEE DETAIL.
MEDICAL AIR MANIFOLD. SEE DETAIL.
EMERGENCY OXYGEN SUPPLY CONNECTION
SOURCE VALVE
MVP-01

1 / P201.5 ENLARGED MEDICAL GAS PLAN - PART "5"
1/4" = 1'-0"

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Revisions:
ADDENDUM #01 - 2019-12-18
ADDENDUM #03 - 2020-01-08

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
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- ENLARGED MEDICAL GAS PLAN - PART "5"

Sheet Number:
P201.5

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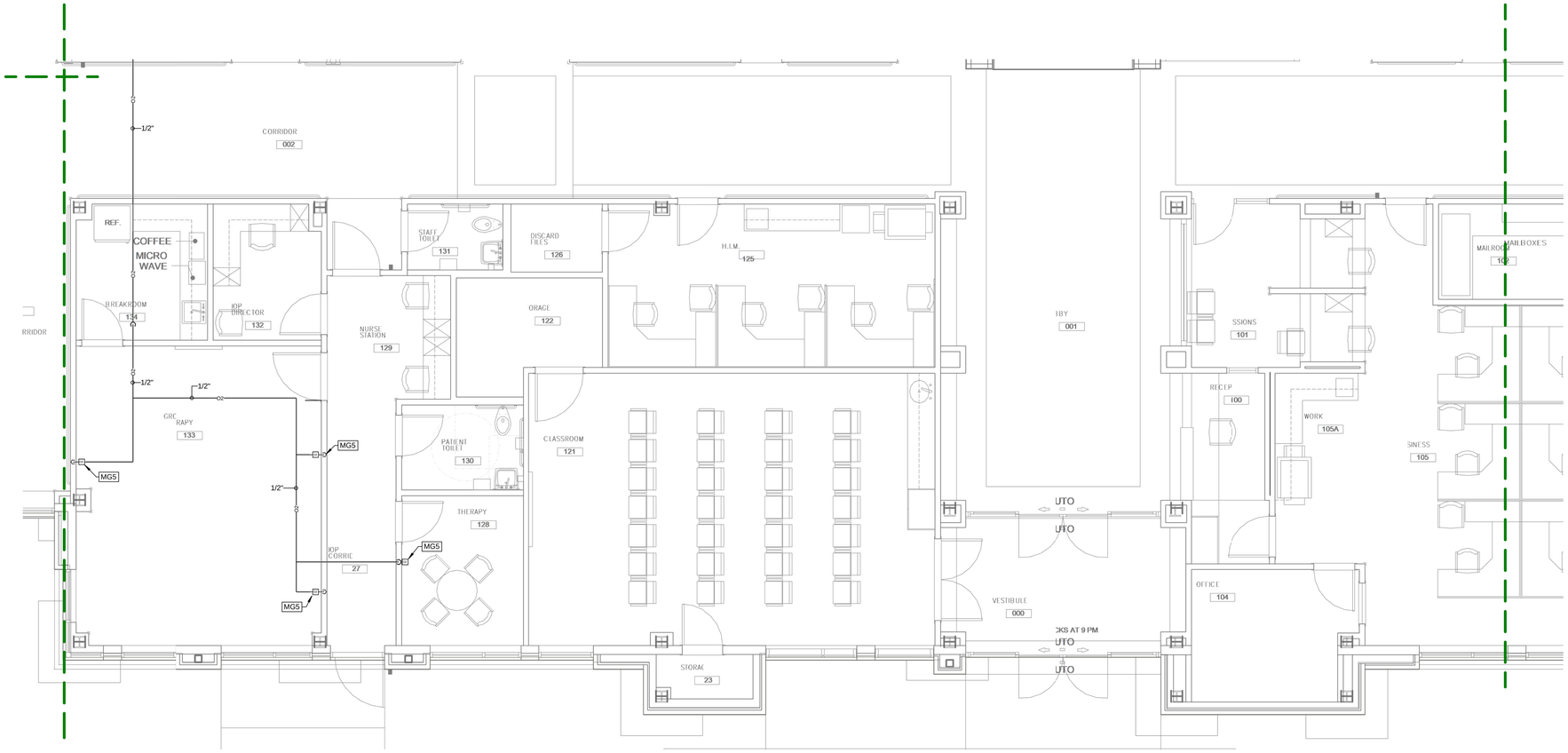
GSK#:111-041

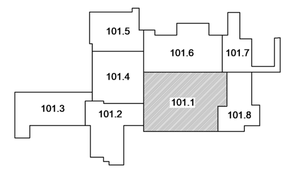
WILLIAM KEITH SMITH
LICENSED PROFESSIONAL ENGINEER
15595
12/4/19
STATE OF MISSISSIPPI

SPECIFIC MED GAS NOTES	
MG5	TYPICAL MEDICAL GAS PIPING DOWN IN WALL TO WALL INLETS/OUTLETS. SEE PLAN FOR SIZE OF PIPING AND QUANTITY OF OUTLETS. COORDINATE MOUNTING HEIGHT WITH ARCHITECT. OXYGEN, MEDICAL AIR, NITROUS OXIDE BRANCH PIPING SHALL BE 1/2" SIZE UNLESS NOTED OTHERWISE. MEDICAL VACUUM & WAGD BRANCH PIPING SHALL BE 3/4" SIZE UNLESS OTHERWISE NOTED.



ENLARGED MEDICAL GAS PLAN - PART "6"

1 / P201.6 — 1/4" = 1'-0"



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Sheet Number: P201.6 - ENLARGED MEDICAL GAS PLAN - PART "6"

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REPLACEMENT FACILITY FOR
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PN 18015

3/8"=1'-0" GRAPHIC SCALE
1 1/16"=1'-0" GRAPHIC SCALE
1"=1'-0" GRAPHIC SCALE
3/16"=1'-0" GRAPHIC SCALE
1/8"=1'-0" GRAPHIC SCALE
3/32"=1'-0" GRAPHIC SCALE

ELECTRICAL LEGEND

LIGHTING

SYMBOL	DESCRIPTION
	SINGLE FACED / DOUBLE FACED EXIT SIGN, CEILING MOUNT, ARROWS INDICATED DIRECTION.
	SINGLE FACED / DOUBLE FACED EXIT SIGN, WALL MOUNTED, ARROWS INDICATED DIRECTION.
A 1	RECESSED LED FIXTURE WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
B 2	LED STRIP WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
D 3	CEILING OUTLET WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
E 4	LED FIXTURE WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
F 5	WALL BRACKET OUTLET WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
G 6	LED WALL BRACKET OUTLET WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
P 7	POLE MOUNTED AREA LIGHT WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
B E A	EMERGENCY BATTERY LIGHT WITH FIXTURE SYMBOL AND CIRCUIT NUMBER.
A 1	SOLID CIRCLE ON ANY LIGHT FIXTURE SYMBOL INDICATES NON-SWITCHED FIXTURE ON EMERGENCY POWER CIRCUIT.
1	HATCH ON ANY LIGHT FIXTURE SYMBOL INDICATES FIXTURE ON EMERGENCY POWER CIRCUIT, AND CONNECTED FOR SWITCHED OPERATION.

SWITCHES

SYMBOL	DESCRIPTION
$	SWITCH SINGLE POLE FLUSH TUMBLER. MOUNT CENTER LINE UP 42", UNLESS NOTED OTHERWISE ON THE PLANS OR IN THE SPECIFICATIONS.
$3	SWITCH, THREE-WAY TUMBLER, MOUNT CENTER LINE UP 42", UNLESS NOTED OTHERWISE ON THE PLANS OR IN THE SPECIFICATIONS.
$4	SWITCH, FOUR-WAY FLUSH TUMBLER. MOUNT CENTER LINE UP 42", UNLESS NOTED OTHERWISE ON THE PLANS OR IN THE SPECIFICATIONS.,
$D	SWITCH, DIMMER TYPE, MOUNT CENTER LINE UP 42", UNLESS NOTED OTHERWISE. SEE LIGHTING CONTROL DETAILS
DP	LOW VOLTAGE DIMMING POWER PACK. SEE LIGHTING CONTROL DETAILS
$DS	DIMMER BUTTON STATION, MOUNT CENTER LINE UP 42", UNLESS NOTED OTHERWISE. SEE LIGHTING CONTROL DETAILS
$S	WALL MOUNT, DUAL TECHNOLOGY, OCCUPANCY SENSER, MOUNT CENTER LINE UP 42", UNLESS NOTED OTHERWISE. SEE LIGHTING CONTROL DETAILS
$K	KEYED RAISE/LOWER SWITCH (BY OTHERS), MOUNT UP CENTER LINE 42" A.F.F. UNLESS NOTED OTHERWISE.
$R/L	RAISE/LOWER SWITCH, MOUNT CENTER LINE UP 42", UNLESS NOTED OTHERWISE ON THE PLANS OR IN THE SPECIFICATIONS.
PP	LOW VOLTAGE OCCUPANCY SENSOR POWER PACK. SEE LIGHTING CONTROL DETAILS
OS	LOW VOLTAGE CEILING MOUNT OCCUPANCY SENSOR. SEE LIGHTING CONTROL DETAILS
$M	MANUAL MOTOR SWITCH, SINGLE POLE, FLUSH MOUNTING, MOUNT UP CENTER LINE 42" A.F.F. UNLESS NOTED OTHERWISE.
PC	PHOTO ELECTRIC CONTROLLER. MOUNT ON ROOF, OR AS NOTED ON PLAN, AIM NORTH.
C1	CONTACTOR, SIZE AND NUMBER OF POLES AS INDICATED.
30/15	SWITCH FUSED SAFETY, WITH FRAME SIZE AND FUSE SIZE. 250V OR 480V.
30A3P	SWITCH NON-FUSED SAFETY, NUMBER POLES, AMPS, 250V OR 480V.
PTX	PUSH TO EXIT BUTTON, MOUNT CENTER LINE UP 42" OR AS NOTED.
CA	CARD ACCESS STATION.
DO	CONNECTION TO I.R. DOOR OPERATOR.
P	WALL MOUNTED PUSH-BUTTON, MOUNT CENTER LINE UP 42" OR AS NOTED.
DL	ELECTRICALLY CONTROLLED DOOR LOCK,
RC	PATIENT ROOM LIGHTING CONTROLLER. SEE PATIENT ROOM LIGHTING CONTROL DETAIL.
WS	PATIENT ROOM LIGHTING CONTROL WALL STATION. SEE PATIENT ROOM LIGHTING CONTROL DETAIL.
PS	PATIENT ROOM PILLOW SPEAKER. SEE PATIENT ROOM LIGHTING CONTROL DETAIL

ELECTRICAL SHEET INDEX

SHEET	SHEET NAME
E001	ELECTRICAL LEGEND, AND INDEX
E002	POWER RISER DIAGRAM
E003	ELECTRICAL SCHEDULES
E004	ELECTRICAL SCHEDULES
E005	ELECTRICAL SCHEDULES
E006	ELECTRICAL SCHEDULES
E007	ELECTRICAL SCHEDULES
E101	SITE PLAN – ELECTRICAL
E201A	PARTIAL FLOOR PLAN – LIGHTING PART "A"
E201B	PARTIAL FLOOR PLAN – LIGHTING PART "B"
E201C	PARTIAL FLOOR PLAN – LIGHTING PART "C"
E201D	PARTIAL FLOOR PLAN – LIGHTING PART "D"
E301A	PARTIAL FLOOR PLAN – POWER PART "A"
E301B	PARTIAL FLOOR PLAN – POWER PART "B"
E301C	PARTIAL FLOOR PLAN – POWER PART "C"
E301D	PARTIAL FLOOR PLAN – POWER PART "D"
E401A	PARTIAL FLOOR PLAN – SYSTEMS PART "A"
E401B	PARTIAL FLOOR PLAN – SYSTEMS PART "B"
E401C	PARTIAL FLOOR PLAN – SYSTEMS PART "C"
E401D	PARTIAL FLOOR PLAN – SYSTEMS PART "D"
E501A	PARTIAL FLOOR PLAN – MECHANICAL EQUIPMENT CONNECTIONS PART "A"
E501B	PARTIAL FLOOR PLAN – MECHANICAL EQUIPMENT CONNECTIONS PART "B"
E501C	PARTIAL FLOOR PLAN – MECHANICAL EQUIPMENT CONNECTIONS PART "C"
E501D	PARTIAL FLOOR PLAN – MECHANICAL EQUIPMENT CONNECTIONS PART "D"
E502	ROOF PLAN – MECHANICAL EQUIPMENT CONNECTIONS PART "D"
E601	LARGE SCALE PARTIAL FLOOR PLANS – ELECTRICAL AND IT ROOMS
E602	ELECTRICAL DETAILS
E603	LARGE SCALE OPERATING ROOM, MINOR PROCEDURE, AND TRAUMA ROOM PLANS – ELECTRICAL
E604	CT SCANNER FLOOR PLAN – ELECTRICAL
E605	X-RAY FLOOR PLAN – ELECTRICAL

ELECTRICAL LEGEND

POWER DISTRIBUTION

SYMBOL	DESCRIPTION
LA-1,3,5	HOME RUN, (CONDUIT AND WIRING) PANEL AND CIRCUIT DESIGNATION, NUMBER OF CONDUCTORS. GROUNDING CONDUCTOR ARE NOT INDICATED BY MARKS, BUT ARE REQUIRED AND SIZED PER BRANCH CIRCUIT UNLESS OTHERWISE NOTED.
	BRANCH CIRCUIT, (CONDUIT AND WIRING) PANEL AND CIRCUIT DESIGNATION, NUMBER OF CONDUCTORS. GROUNDING CONDUCTORS ARE NOT INDICATED BY MARKS, BUT ARE REQUIRED AND SIZED PER BRANCH CIRCUIT UNLESS OTHERWISE NOTED.
	RACEWAY INSTALLED CONCEALED ABOVE CEILING OR IN WALL.
	RACEWAY INSTALLED CONCEALED IN SLAB OR BELOW GRADE.
—UE—	UNDERGROUND ELECTRICAL CIRCUIT.
—UGP—	UNDERGROUND ELECTRICAL PRIMARY CIRCUIT.
—UGS—	UNDERGROUND ELECTRICAL SECONDARY CIRCUIT.
—FOC—	UNDERGROUND FIBER OPTIC CABLE.
	BRANCH CIRCUIT (CONDUIT AND WIRING) IN FLEXIBLE METAL CONDUIT, NUMBER OF CONDUCTORS. (6'-0" MAXIMUM LENGTH).
	GROUND PER NEC ARTICLE 250.
	CONDUIT UP / CONDUIT DOWN.
	DISTRIBUTION / POWER PANEL, SURFACE MOUNTED.
	ELECTRICAL PANEL, 250 VOLT SYSTEM, SURFACE / FLUSH MOUNT.
	ELECTRICAL PANEL, 480 VOLT SYSTEM, SURFACE / FLUSH MOUNT.
EMS	ENERGY MANAGEMENT SYSTEM CONTROL PANEL. FURNISHED AND INSTALLED BY MECHANICAL CONTRACTOR. ELECTRICAL CONNECTIONS BY ELECTRICAL CONTRACTOR.
ATS	AUTOMATIC TRANSFER SWITCH.
FIP	FAULT INDICATOR PANEL, SEE SPECIFICATIONS.
	NEW POLE.
	EXISTING POLE TO REMAIN.
	3ø POLE MOUNTED TRANSFORMER BANK, BY UTILITY CO.
	1ø POLE MOUNTED TRANSFORMER, BY UTILITY CO.
	METER SOCKET. – SEE RISER / ONE LINE.
PB	ELECTRICAL PULL BOX.
	CONNECTION TO MOTOR.
VFD	VARIABLE FREQUENCY DRIVE.
T	TRANSFORMER, DRY TYPE, KVA.
VAV-X-XX	VARIABLE AIR VOLUME BOX AND MARK

RECEPTACLES

SYMBOL	DESCRIPTION
	DUPLEX GROUNDABLE RECEPTACLE, 120 VOLTS, NEMA 5-20R, WITH CIRCUIT NUMBER. MOUNT UP 18" A.F.F. / 4" CENTER LINE ABOVE COUNTER BACKSPLASH OR 42" A.F.F. UNLESS NOTED OTHERWISE.
	DOUBLE DUPLEX GROUNDABLE RECEPTACLES, 120 VOLTS, NEMA 5-20R, WITH CIRCUIT NUMBER. MOUNT UP 18" A.F.F. / 4" CENTER LINE ABOVE COUNTER BACKSPLASH OR 42" A.F.F. UNLESS NOTED OTHERWISE.
	DUPLEX GROUND FAULT INTERRUPTER TYPE RECEPTACLE, 120 VOLTS, NEMA 5-20R, WITH CIRCUIT NUMBER. MOUNT UP 18" A.F.F. / 4" CENTER LINE ABOVE COUNTER BACKSPLASH OR 42" A.F.F. UNLESS NOTED OTHERWISE.
	DUPLEX GROUNDABLE, SAFETY TYPE, 120 VOLTS, NEMA 5-20R, WITH CIRCUIT NUMBER. MOUNT UP 18" CENTER LINE A.F.F. / 4" ABOVE COUNTER BACKSPLASH OR 42" A.F.F. UNLESS NOTED OTHERWISE.
TV	THIS NOTATION ADJACENT TO ANY RECEPTACLE SYMBOL INDICATES RECEPTACLE TO BE MOUNTED ADJACENT TO CABLE TV OUTLET.
	SPECIAL RECEPTACLE, 250 VOLT, NEMA CONFIGURATION AS PER NAME PLATE DATA ON EQUIPMENT TO BE CONNECTED OR AS INDICATED ON PLANS. MOUNT CENTER LINE 18" A.F.F. UNLESS NOTED OTHERWISE.
WP	THIS NOTATION ADJACENT TO ANY RECEPTACLE SYMBOL INDICATES DUPLEX GROUNDABLE, 120 VOLT. NEMA 5-20R, GROUND FAULT INTERRUPTER TYPE RECEPTACLE IN A DAMP LOCATION, SHALL HAVE AN ENCLOSURE THAT IS WEATHERPROOF WHEN THE RECEPTACLE IS COVERED. (PLUG NOT INSERTED AND RECEPTACLE COVERS CLOSED). (COMPLIES WITH SECTION 410-57(a) OF 1999 N.E.C.).
	CEILING MOUNTED CABLE REEL WITH 120V DUPLEX RECEPTACLE.

NURSE CALL SYSTEM

SYMBOL	DESCRIPTION
	NURSE CALL SYSTEM MASTER CONTROL UNIT, AUDIO VISUAL.
	WALL TYPE EMERGENCY CALLING STATION WITH CALL CORD, MOUNT UP CENTER LINE 2'-6" A.F.F.
	BED SIDE EMERGENCY CALLING STATION, WITH CALL CORD, MOUNT CENTER LINE UP 2'-6" A.F.F.
	AUDIO/VISUAL NURSE CALL STAFF STATION, MOUNT CENTER LINE 5'-0" A.F.F.
	DUTY STATION, MOUNT CENTER LINE UP 5'-0" A.F.F.
	CODE BLUE STATION, MOUNT CENTER LINE UP 2'-6" A.F.F.
	CORRIDOR DOME LIGHT, MOUNT CENTER LINE UP 80" ABOVE FINISHED FLOOR OR 6" BELOW CEILING WHICHEVER LOWER.
NC	NURSE CALL SYSTEM TERMINAL CABINET WITH POWER SUPPLY, HOMERUNS TO THIS POINT, WITH HINGED FLUSH DOORS, MOUNTED FLUSH.

KEYNOTES

SYMBOL	DESCRIPTION
1	SHEET KEYNOTE.
2	POWER RISER KEYNOTE.
3	REVISION KEYNOTE.
4	MECHANICAL EQUIPMENT KEYNOTE, SEE MECHANICAL EQUIPMENT POWER CONNECTION SCHEDULE.
5	KITCHEN EQUIPMENT KEY NOTE.

CONDUCTOR SIZING CHART

MAX. DISTANCE IN FEET	120 VOLT	277 VOLT
75'	#12	#12
120'	#10	#12
130'	#8	#12
150'	#8	#10
200'	#6	#10
250'	#6	#8
THIS TABLE REFLECTS VOLTAGE DROP FOR 15 AND 20 AMP CIRCUITS		

ELECTRICAL LEGEND

FLOOR BOXES

SYMBOL	DESCRIPTION
	FLOOR BOX, SINGLE GANG, FOR COMBINATION TELEPHONE AND DATA, FLUSH TYPE.
	FLOOR BOX, SINGLE GANG, FOR TELEPHONE, FLUSH TYPE.
	FLOOR BOX, SINGLE GANG, FOR DATA, FLUSH TYPE.
	FLOOR BOX, DOUBLE GANG, FOR COMBINATION TELEPHONE, DATA AND DUPLEX GROUNDABLE RECEPTACLE, 120V, NEMA 5-20R, FLUSH TYPE.
	FLOOR BOX, DOUBLE GANG, FOR DATA AND DUPLEX GROUNDABLE RECEPTACLE, 120V, NEMA 5-20R, FLUSH TYPE.
	FLOOR BOX, DOUBLE GANG, FOR TELEPHONE AND DUPLEX GROUNDABLE RECEPTACLE, 120V, NEMA 5-20R, FLUSH TYPE.
	FLOOR BOX, SINGLE GANG, FOR DUPLEX GROUNDABLE RECEPTACLE, 120V, NEMA 5-20R, FLUSH TYPE.
	FLOOR BOX, DOUBLE GANG, DOUBLE DUPLEX GROUNDABLE RECEPTACLE, 120V, NEMA 5-20R, FLUSH TYPE.
	FLOOR BOX, THREE GANG, COMBINATION TELEPHONE, DATA, AND DOUBLE DUPLEX GROUNDABLE RECEPTACLE, 120V, NEMA 5-20R, FLUSH TYPE.

FIRE ALARM

SYMBOL	DESCRIPTION
FAC	FIRE ALARM SYSTEM CONTROL CABINET, MOUNT CENTER LINE 4'-6". ROUTE ALL FIRE ALARM HOMERUNS TO THIS POINT.
FA	FIRE ALARM SYSTEM REMOTE ANNUNCIATOR, MOUNT CENTER LINE UP 4'-6".
F	FIRE ALARM SYSTEM MANUAL STATION, MOUNT CENTER LINE UP 42".
S	FIRE ALARM SYSTEM SMOKE DETECTOR, CEILING MOUNTED
H	RATE OF RISE / THERMAL DETECTOR WITH 135°C ELEMENT.
D	DUCT SMOKE DETECTOR, PHOTO ELECTRIC TYPE WITH SAMPLING TUBES, INSTALL IN DUCT AS DIRECTED BY MECHANICAL CONTRACTOR.
E	SMOKE DETECTOR WITH ELEVATOR RECALL – PHOTO ELECTRIC TYPE WITH 2P20A AUXILIARY CONTACTS FOR ELEVATOR RECALL, CEILING MOUNTED, RUN ⅜"C, 2–#12, #12 –G– FROM DETECTOR TO ELEVATOR CONTROL PANEL.
T	FIRE ALARM CONNECTION TO TAMPER SWITCH.
W	FIRE ALARM CONNECTION TO FLOW SWITCH.
M	MAGNETIC DOOR HOLD OPEN – FIRE ALARM DEVICE.
F	FIRE ALARM SYSTEM AUDIBLE AND VISUAL ALARM DEVICE, MOUNT CENTER LINE UP 84" ABOVE FINISHED FLOOR OR 6" BELOW CEILING WHICHEVER IS LOWER, STROBE 110 CD UNLESS NOTED.
F	FIRE ALARM SYSTEM VISUAL ALARM DEVICE, MOUNT CENTER LINE UP 84" ABOVE FINISHED FLOOR OR 6" BELOW CEILING WHICHEVER IS LOWER, STROBE 110 CD UNLESS NOTED.
B	FIRE ALARM SYSTEM AUDIBLE ALARM DEVICE, MOUNT CENTER LINE UP 96" ABOVE GRADE. SUITABLE FOR WET LOCATION.
SD	120V CONNECTION AND MONITORING FOR COMBINATION FIRE/SMOKE DAMPER.
PIV	CONNECTION TO POST INDICATOR VALVE

COMMUNICATIONS

SYMBOL	DESCRIPTION
	TELEPHONE BACKBOARD, SIZE AS NOTED, ¾" PLYWOOD, LONG DIMENSION VERTICAL. TERMINATE ALL TELEPHONE HOMERUNS AT THIS POINT AND BUSH.
	TELEPHONE OUTLET AND PLATE, ¾" OR SIZE AS NOTED CONDUIT STUBBED UP ABOVE ACCESSIBLE CEILING. MOUNT OUTLET CENTER LINE UP 18" A.F.F. / 4" ABOVE COUNTER BACKSPLASH, UNLESS NOTED OTHERWISE.
	DATA OUTLET AND PLATE, ¾" OR SIZE AS NOTED CONDUIT STUBBED UP ABOVE ACCESSIBLE CEILING. MOUNT OUTLET CENTER LINE UP 18" A.F.F. / 4" ABOVE COUNTER BACKSPLASH, UNLESS NOTED OTHERWISE.
	COMBINATION TELEPHONE/DATA OUTLET AND PLATE, ¾" OR SIZE AS NOTED CONDUIT STUBBED UP ABOVE ACCESSIBLE CEILING. MOUNT OUTLET CENTER LINE UP 18" A.F.F. / 4" ABOVE COUNTER BACKSPLASH, UNLESS NOTED OTHERWISE.
TV	CATV OUTLET AND PLATE, ¾" OR SIZE AS NOTED CONDUIT STUBBED UP ABOVE ACCESSIBLE CEILING. MOUNT OUTLET CENTER LINE UP 18", UNLESS NOTED OTHERWISE ON THE PLAN OR IN THE SPECIFICATIONS.
J	SURFACE JUNCTION BOX, SIZE AND MOUNTING HEIGHT AS NOTED.
J	RECESSED JUNCTION BOX, SIZE AND MOUNTING HEIGHT AS NOTED.
C	CCTV CAMERA CONNECTION, WITH POWER SUPPLY.
C PTZ	CCTV, CAMERA CONNECTION WITH POWER SUPPLY, PAN-TILT-ZOOM TYPE, IN WEATHERPROOF ENCLOSURE MOUNTED TO POLE.

MISCELLANEOUS

SYMBOL	DESCRIPTION
	SINGLE-FACED CLOCK.
	DOUBLE-FACED CLOCK.
	WALL MOUNTED INTERCOM SPEAKER.
PA	P.A. MASTER STATION.
IS	INTERCOM STATION AT DOOR. PROVIDE 4" SQUARE BOX AND STUB-UP 3/4" CONDUIT TO ABOVE ACCESSIBLE CEILING.
IM	INTERCOM MASTER STATION. PROVIDE 4" SQUARE BOX AND STUB-UP 3/4" CONDUIT TO ABOVE ACCESSIBLE CEILING.
MMG	MASTER MEDICAL GAS ALARM PANEL.
MG	REMOTE MEDICAL GAS ALARM PANEL.
WT	120V CONNECTION TO WATER TREATMENT SYSTEM. PROVIDE MOTOR RATED SWITCH WITH OVERLOAD PER NAMEPLATE AS DISCONNECTING MEANS.
MV	120V CONNECTION TO MIXING VALVE. PROVIDE MOTOR RATED SWITCH WITH OVERLOAD PER NAMEPLATE AS DISCONNECTING MEANS.

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Revissions: 1 ADDENDUM #1 DECEMBER 18, 2019
3 ADDENDUM #3 JANUARY 8, 2020

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: MLL
Checked: JDR

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : E001 - ELECTRICAL LEGEND, AND INDEX

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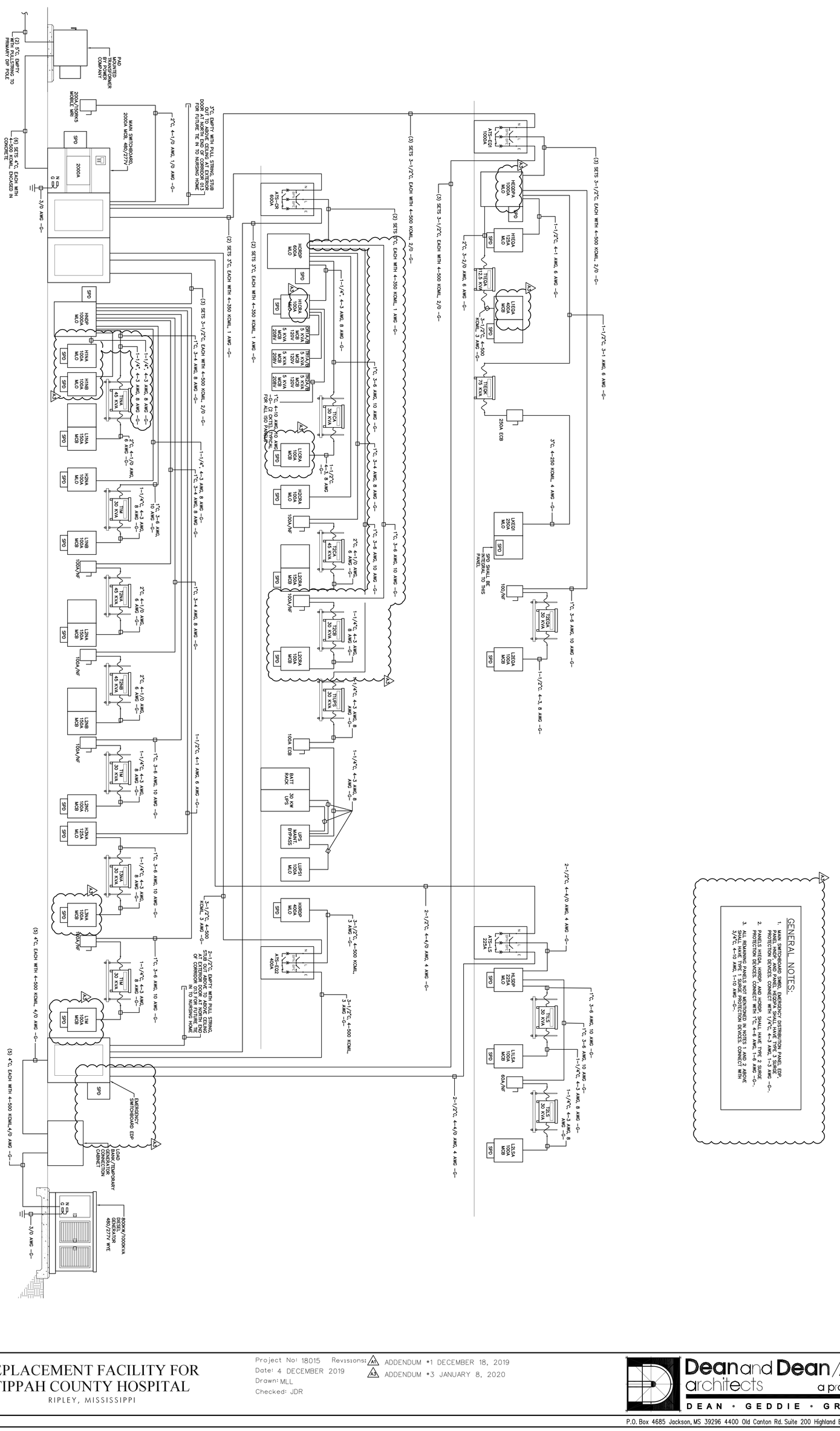
REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

1/16" =1'-0" GRAPHIC SCALE
1/4" =1'-0" GRAPHIC SCALE
1/2" =1'-0" GRAPHIC SCALE
3/4" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
1 1/2" =1'-0" GRAPHIC SCALE
3" =1'-0" GRAPHIC SCALE



(1) POWER RISER DIAGRAM
SCALE: NOT TO SCALE

- POWER RISER DIAGRAM

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Sheet Number : E002

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: MLL
Checked: JDR

Revisions:
1 ADDENDUM #1 DECEMBER 18, 2019
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LIGHT FIXTURE SCHEDULE

SYMBOL	VOLTS	WATTS/LAMPS	DESCRIPTION	MANUFACTURER	CATALOG NUMBER	MOUNTING
A1	277	60 WATTS/ 6611 LMN LED	2'X4' 6611 LUMEN LED FLAT PANEL – –	METALUX	24FP6440C – –	LAY-IN – –
A2	277	41 WATT/ 4858 LMN LED	2'X4' 4858 LUMEN LED LED FLAT PANEL – –	METALUX	24FP4740C – –	LAY-IN – –
A3	277	30 WATTS/ 3607 LMN LED	2'X4' 3607 LUMEN LED FLAT PANEL – –	METALUX	24FP3140C – –	LAY-IN – –
A4	277	42 WATTS/ 4581 LMN LED	2'X4' 4581 LUMEN LED FLAT PANEL – –	FAIL-SAFE	FSP-24-47-40-CA0B – –	LAY-IN – –
B1	277	40 WATTS/ 4567 LMN LED	2'X2' 4567 LUMEN LED FLAT PANEL – –	METALUX	22FP4240C – –	LAY-IN – –
B2	277	31 WATTS/ 3560 LMN LED	2'X2' 3560 LUMEN LED FLAT PANEL – –	METALUX	22FP3240C – –	LAY-IN – –
B3	277	21 WATTS/ 2494 LMN LED	2'X2' 2494 LUMEN LED FLAT PANEL – –	METALUX	22FP2140C – –	LAY-IN – –
C1	277	63 WATTS/ 6572 LMN LED	2'X4' 6552 LUMEN LED VOLUMETRIC TROFFER TROFFER –	METALUX	24CZ2-65-UNV-L840-CD1-U – –	LAY-IN – –
C2	277	43 WATTS/ 4618 LMN LED	2'X4' 4618 LUMEN LED VOLUMETRIC TROFFER – –	METALUX	24CZ2-45-UNV-L840-CD1-U – –	LAY-IN – –
C3	277	22 WATTS/ 2450 LMN LED	2'X2' 2450 LUMEN LED VOLUMETRIC TROFFER – –	METALUX	22CZ2-24-UNV-L840-CD1-U – –	LAY-IN – –
C4	277	43 WATTS/ 4424 LMN LED	2'X4' 4424 LUMEN LED VOLUMETRIC TROFFER – –	METALUX	22CZ2-44-UNV-L840-CD1-U – –	LAY-IN – –
D1	277	36 WATTS/ 4195 LMN LED	4'X6" RECESSED LED SLOT (SELECTABLE LUMENS – 36 WATTS/4195 LUMENS) –	METALUX	4RBG6-SL1-L8SCT3-4000K-HI –	RECESSED – –
D2	277	36 WATTS/ 3339 LMN LED	4'X6" RECESSED LED SLOT (SELECTABLE LUMENS – 28 WATTS/3339 LUMENS) –	METALUX	4RBG6-SL1-L8SCT3-4000K-MID –	RECESSED – –
D3	277	87 WATTS/ 3806 LMN LED	8" LINEAR FULL LENGTH WALL GRAZER – –	NEO-RAY	S79PF-1-L40-11FT11N-UDD-1-D-DC-W –	RECESSED – –
D4	277	58 WATTS/ 2450 LMN LED	8" LINEAR FULL LENGTH WALL GRAZER – –	NEO-RAY	S79PF-1-L40-6FT8IN-UDD-1-D-DC-W –	RECESSED – –
E	277	43 WATTS/ 2566 LMN LED	2' LED VANITY WALL BRACKET – –	TERON LIGHTING	CPR24-L36_0-120-277-ZE1100-SM-30K –	WALL OVER MIRROR –
F	277	– – –	DECORATIVE FIXTURE TO BE SELECTED BY OWNER (CONFIRM ALLOWANCES WITH GENERAL CONTRACTOR)	TBD	– – –	– – –
FL	277	128 WATTS/ 16,932 LUMEN LED	16,932 LUMEN LED FLOOD LIGHT FOR FLAG POLE LIGHTING –	LUMARK	NFFLD-C40-E-UNV-33-S-XX-TS2/NFFLD-XX (COLOR BY ARCHITECT)	SLIPFIT 4' FROM BASE OF FLAGPOLE
G	277	15.5 WATTS/ 1500 LMN LED	4" LED WALL WASH DOWNLIGHT – –	PORTFOLIO	LD4B-15-D010-EU4B-1020-80-40K-4LB-SW-2-LI –	RECESSED – –
G2	277	21.2 WATTS/ 2000 LMN LED	6" LED WALL WASH DOWNLIGHT – –	PORTFOLIO	LD6B-20-D010-EU4B-1020-80-40K-4LB-SW-2-LI –	RECESSED – –
H	277	20W/ 1830 LMN LED	6" 1830 LUMEN LED DOWNLIGHT – –	HALO	HC620D010-HM612840-61MDH-WF –	RECESSED – –
I/J	277	– – –	NOT USED – –	–	– – –	– – –
K	277	10 WATTS/ 953 LMN LED	6" 953 LUMEN LED DOWNLIGHT – –	HALO	HC610D010-HM612840-61MDH-WF –	RECESSED – –
L	277	17 WATTS/ 4975 LMN LED	2' X 6" LED RECESSED WALL WASH – –	VISIONEERING	LRWW-R-24-LED-8-40K-020L-UNV-B03(01) –	RECESSED – –
M1	277	71 WATTS/ 6522 LMN LED	2'X4' SEALED VOLUMETRIC TROFFER – –	FAIL-SAFE	ENC-24-4-LD2-67-40-CA08-UNV-EDC1 –	LAY-IN – –
M2	277	38 WATTS/ 4748 LMN LED	2'X4' SEALED VOLUMETRIC TROFFER – –	FAIL-SAFE	ENC-24-4-LD2-45-40-CA08-UNV-EDC1 –	LAY-IN – –

LIGHT FIXTURE SCHEDULE

SYMBOL	VOLTS	WATTS/LAMPS	DESCRIPTION	MANUFACTURER	CATALOG NUMBER	MOUNTING
N	277	3 WATTS/ 15 LMN LED	LOUVERED AMBER LED NIGHTLIGHT – –	FAIL-SAFE A1	MLN-UNV-BN (COLOR BY ARCHITECT) –	WALL AT 18" AFF – –
O	277	– – –	NOT USED – –	–	– – –	– – –
P1	277	20 WATTS/ 2198 LMN LED	4' LED COVE LIGHT – –	TRAXON	MB.CC.4014002 – –	SURFACE IN COVE –
P2	277	5 WATTS/ 509 LMN LED	1' LED COVE LIGHT – –	TRAXON	MB.CC.1014002 – –	SURFACE IN COVE –
P3	277	48 WATTS/ 5145 LMN LED	4' LED COVE LIGHT – –	TRAXON	MB.CC.4014005 – –	SURFACE IN COVE –
P4	277	12 WATTS/ 1261 LMN LED	1' LED COVE LIGHT – –	TRAXON	MB.CC.1014005 – –	SURFACE IN COVE –
Q	120	21 WATTS/ 1540 LMN LED	4' LED UNDER CABINET LIGHT – –	HALO	HU11-48-D9-S-P – –	UNDER CABINET – –
R1	277	178 WATTS/ 17,346 LMN LED	2'X4' LED SURGICAL TROFFER WITH TWO, DIMMABLE LED DRIVERS –	FAIL-SAFE	ORLG-24-4-INS-ASR-LD4-4STD50-277-ED1D-2 –	LAY-IN –
R2	277	70 WATTS/ 7924 LMN LED	2'X2' LED SURGICAL TROFFER WITH WHITE AND GREEN LIGHTING, AND THREE DIMMABLE LED DRIVERS –	FAIL-SAFE	ORLG-24-2-INS-ASR-LD4-4STD50/2STD52-277-ED1D-3 –	LAY-IN – –
R3	277	178 WATTS/ 17,346 LMN LED	2'X4' LED SURGICAL TROFFER WITH WHITE AND GREEN LIGHTING, AND THREE DIMMABLE LED DRIVERS –	FAIL-SAFE	ORLG-24-4-INS-ASR-LD4-4STD50/2STDG52-277-ED1D-3 –	LAY-IN – –
S	277	28 WATTS/ 1170 LMN LED	6" LED SHOWER DOWNLIGHT – –	HALO A2	L750WH12940 –	RECESSED –
SC	277	24 WATTS/ 1770 LMN LED	24" DECORATIVE LED WALL SCONCE – –	BEGA	SC-24-591-K4-SLV –	WALL AT 6'-0" TO CENTER OF FIXTURE
T	277	23 WATTS/ 3263 LMN LED	4' LED STRIP LIGHT – –	METALUX	4SWLED-ADP-30SL-CC-ONUV-L840-CD1-U –	SURFACE OR CHAIN AS REQUIRED –
U	277	36 WATTS/ 4059 LMN LED	4' VAPORTIGHT LED STRIP LIGHT – –	VISIONEERING	LSVA48-LED840K042LUNV –	SURFACE – –
V	277	33.7 WATTS/ 3187 LMN LED	4' LED HOSE DOWN FIXTURE – –	FAIL-SAFE	HDF-4-LD4-STD-40-UNV-EDC1-A12125-SMB –	SURFACE – –
W	277	26 WATTS/ 3250 LMN LED	LED TRAPEZOIDAL WALL PACK WITH TYPE IV DISTRIBUTION –	MCGRAW-EDISON	IST-AF-450-LED-E1-T4FT-GM –	WALL AT 10'-0" AFG –
–	–	– – –	– – –	– A2	– – –	– – –
SL2	277	131 WATTS/ 17,172 LUMEN LED	SINGLE LED AREA LIGHT WITH TYPE II DISTRIBUTION – –	LUMARK	PRV-C40-D-UNV-T2-SA-GM –	25' POLE ON 36" TALL CONCRETE BASE (NOTE 1)
SL31	277	131 WATTS/ 17,144 LUMEN LED	SINGLE LED AREA LIGHT WITH TYPE III DISTRIBUTION – –	LUMARK	PRV-C40-D-UNV-T3-SA-GM –	25' POLE ON 36" TALL CONCRETE BASE (NOTES 1 & 2)
SL32	277	262 WATTS/ 34,288 LUMEN LED	DUAL HEAD LED AREA LIGHT WITH TYPE III DISTRIBUTION –	LUMARK	(2) PRV-C40-D-UNV-T3-SA-GM –	25' POLE ON 36" TALL CONCRETE BASE (NOTE 3)
SL4	277	131 WATTS/ 17,087 LUMEN LED	SINGLE LED AREA LIGHT WITH TYPE IV DISTRIBUTION – –	LUMARK	PRV-C40-D-UNV-T4-SA-GM –	25' POLE ON 36" TALL CONCRETE BASE (NOTE 1)
SL5	277	131 WATTS/ 18,264 LUMEN LED	SINGLE LED AREA LIGHT WITH TYPE V DISTRIBUTION – –	LUMARK	PRV-C40-D-UNV-T5-SA-GM –	25' POLE ON 36" TALL CONCRETE BASE (NOTE 1)
Y1	277	63 WATTS/ 6687 LMN LED	2'X4' 6687 LUMEN SEALED LED TROFFER – –	FAIL-SAFE	FSP-24-64-40-CA080 – –	LAY-IN – –
Y2	277	42 WATTS/ 4581 LMN LED	2'X4' SEALED LED TROFFER – –	FAIL-SAFE	FSP-24-47-40-CA080 – –	LAY-IN – –
Y3	277	30 WATTS/ 3714 LMN LED	2'X4' 3714 LUMEN SEALED LED TROFFER – –	FAIL-SAFE	FSP-24-31-40-CA080 – –	LAY-IN – –
Y4	277	19.6 WATTS/ 3714 LMN LED	2'X4' 3714 LUMEN SEALED LED TROFFER – –	FAIL-SAFE	FSP-24-31-40-CA080 – –	LAY-IN – –
Z1	277	25 WATTS/ 2841 LMN LED	4' LED WALL BRACKET – –	METALUX	4SWLED-28SL-LW-UNV-L840-CD1-U –	WALL OVER DOOR – –
Z2	277	9 WATTS/ 914 LMN LED	2' LED WALL BRACKET –	METALUX	2SWLED-8SL-LW-UNV-L840-CD1-U –	WALL OVER DOOR –
X1	277	5 WATTS/ LED –	SINGLE FACE, EDGE LIT, LED EXIT SIGN WITH KNOCKOUT DIRECTIONAL CHEVRONS TO BE REMOVED AS INDICATED ON PLANS	SURE-LITES	APXEL-6-1-R – –	UNIVERSAL – –
X2	277	5 WATTS/ LED –	DOUBLE FACE, EDGE LIT, LED EXIT SIGN WITH KNOCKOUT DIRECTIONAL CHEVRONS TO BE REMOVED AS INDICATED ON PLANS	SURE-LITES	APXEL-6-2-R – –	UNIVERSAL – –
X3	277	4 WATT, LED –	EMERGENCY LIGHTING UNIT	SURE-LITES	SPL50 – –	WALL AT 7'-6" AFF – –

NOTE 1: POLE – KW #SSP25-4.0-11-(XX)-BC (FINISH SHALL BE GRAPHITE METALLIC TO MATCH FIXTURE).
NOTE 2: TWO POLES INDICATED IN NOTE 1 SHALL BE 30' TALL AND MODIFIED AS NECESSARY FOR THE FIXTURE TO BE 28' ABOVE FINISHED GRADE WITH A CONCRETE BASE THAT IS 3" ABOVE FINISHED GRADE.
NOTE 3: POLE – KW #SSP25-4.0-11-(XX)-DM2180-BC (FINISH SHALL BE GRAPHITE METALLIC TO MATCH FIXTURE).

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Revisions: A1 ADDENDUM #1 DECEMBER 18, 2019
A2 ADDENDUM #3 JANUARY 8, 2020

Project No: 18015
Date: 4 DECEMBER 2019
Drawn:MLL
Checked: JDR

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

- ELECTRICAL SCHEDULES

Sheet Number : E003

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REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

PANEL NAME: SWBD | MAIN BUS: 2000 AMPS | KAIC RATING: 35 KAIC
VOLTAGE: 277/480V, 3ø, 4W | NEUTRAL BUS.: 2000 AMPS | CONNECTED LOAD: 2267.3 AMPS
MOUNTING: HOUSEKEEPING PAD | GROUND BUS: 1000 AMPS | DEMAND LOAD:

CIR. NO.	LOAD	BREAKER FRAME	TRIP RATING	FEEDER CIRCUIT	LOAD KVA	REMARKS
1	HNDP	800	800	SEE RISER	453.33	–
2	LIFE SAFETY ATS	225	225	SEE RISER	30.2	–
3	CRITICAL ATS	600	600	SEE RISER	160.67	–
4	EQ BRANCH 1 ATS	1080	1000	SEE RISER	686.09	–
5	EQ BRANCH 2 ATS	400	400	SEE RISER	262	–
6	CHILLER	400	400	SEE RISER	158.9	–
7	MRI	200	200	SEE RISER	125	–
8	FUTURE	400	400	SEE RISER	–	FUTURE FOR NURSING HOME
9	SPD	100	100	SEE RISER	–	–
10	SPARE	–	–	–	–	–
11	SPARE	–	–	–	–	–

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
HNDP	–	–	–	–	–
LIFE SAFETY ATS	–	–	–	–	–
CRITICAL ATS	–	–	–	–	–
EQ 1 ATS	–	–	–	–	–
EQ2 ATS	–	–	–	–	–
CHILLER	–	–	–	–	–
MRI	–	–	–	–	–
TOTAL LOAD	1884.19	–	–	2267.3	–

PANEL NAME: EDP | MAIN BUS: 1600AMPS | KAIC RATING: 35 KAIC
VOLTAGE: 277/480V, 3ø, 4W | NEUTRAL BUS.: 1600 AMPS | CONNECTED LOAD: 1380 AMPS
MOUNTING: SURFACE | GROUND BUS: 800 AMPS | DEMAND LOAD:

CIR. NO.	LOAD	BREAKER FRAME	TRIP RATING	FEEDER CIRCUIT	LOAD KVA	REMARKS
1	ATS-LS	225	225	SEE RISER	30.2	–
2	ATS-CR	600	600	SEE RISER	160.67	–
3	ATS-EQ1	1080	1000	SEE RISER	686.1	–
4	ATS-EQ2	400	400	SEE RISER	262	–
5	FUTURE	200	200	SEE RISER	–	FUTURE FOR NURSING HOME
6	SPD	100	100	SEE RISER	–	–

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIFE SAFETY ATS	–	–	–	–	–
CRITICAL ATS	–	–	–	–	–
EQ 1 ATS	–	–	–	–	–
EQ2 ATS	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	1146.97	–	–	1380	–

PANEL NAME: H1EQA | SIZE: 400 AMP | KAIC RATING: 36 KAIC
VOLTAGE: 277/480V, 3ø, 4w | MAIN BKR.: MLO | CONNECTED: 344 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	AHU-1	70A/3P	13.85 / 10.3			50A/3P	AHU-2	2
3	I	I		13.85 / 10.3		I	I	4
5	I	I			13.85 / 10.3	I	I	6
7	AHU-4	30A/3P	4.82 / 6.65			40A/3P	AHU-5	8
9	I	I		4.82 / 6.658		I	I	10
11	I	I			4.82 / 6.65	I	I	12
13	AHU-6	30A/3P	4.82 / 3.38			20A/3P	AHU-9	14
15	I	I		4.82 / 3.39		I	I	16
17	I	I			4.82 / 3.38	I	I	18
19	MAU-01	15A/3P	1.33 / 7.95			40A/3P	HWPS-01	20
21	I	I		1.33 / 7.95		I	I	22
23	I	I			1.33 / 7.95	I	I	24
25	CHPS-01	70A3P	15.5 / 5.93			40A/3P	MVP-01	26
27	I	I		15.5 / 5.93		I	I	28
29	I	I			15.5 / 5.93	I	I	30
31	KEF-01	15A/3P	1.33 / 8.33			40A/3P	HOOD DIST. SYSTEM	32
33	I	I		1.33 / 8.33		I	I	34
35	I	I			1.33 / 8.33	I	I	36
37	SPARE	20A/1P	---/---			20A/1P	SPARE	38
39	SPARE	20A/1P		---/---		20A/1P	SPARE	40
41	SPARE	20A/1P			---/---	20A/1P	SPARE	42
43	STERILIZER-DECON. 619	50A/3P	9.97 / ---			20A/1P	SPARE	44
45	I	I		9.97 / ---		20A/1P	SPARE	46
47	I	I			9.97 / ---	20A/1P	SPARE	48
49	SPACE		---/---				SPACE	50
51	SPACE			---/---			SPACE	52
53	SPACE				---/---		SPACE	54
55	SPACE		---/---			60A/3P	SPD	56
57	SPACE			---/---		I	I	58
59	SPACE				---/---	I	I	60
TOTAL VA. PER ø			95.16	95.16	95.16			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	285.48	–	–	344	–

PANEL NAME: HNDP | SIZE: 800 AMP | KAIC RATING: 36 KAIC
VOLTAGE: 277/480V, 3ø, 4W | MAIN BKR.: MLO | CONNECTED: 588 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	H1NA	100A/3P	2.89 / 4.3			100A/3P	H2NA	2
3	I	I		3.11 / 4.45		I	I	4
5	I	I			2.57 / 2.34	I	I	6
7	L1NA	70A/3P	24.02 / 27.74			70A/3P	L2NA	8
9	45 KVA XFRMER	I		22.1 / 26.28		I	45 KVA XFRMER	10
11	I	I			21.22 / 24.62	I	I	12
13	L1NB	60A/3P	7.36 / 21.72			70A/3P	L2NB	14
15	30 KVA XFRMER	I		9.46 / 25.06		I	45 KVA XFRMER	16
17	I	I			6.85 / 20.98	I	I	18
19	L1M	60A/3P	8.46 / 22.09			100A/3P	H1NB	20
21	30 KVA XFRMER	I		7.14 / 22.09		I	I	22
23	I	I			8.7 / 22.09	I	I	24
25	HRCH-01	175A/3P	35.23 / 12.26			60A/3P	L1NB	26
27	I	I		35.23 / 12.04		I	30 KVA XFRMER	28
29	I	I			35.23 / 11.35	I	I	30
31	SPARE	100A/3P	---/---				SPACE	32
33	I	I		---/---			SPACE	34
35	I	I			---/---		SPACE	36
37	L2NC	60A/3P	1.5 / ---			100A/3P	SPD	38
39	30 KVA XFRMER	I		1.5 / ---		I	I	40
41	I	I			1.5 / ---	I	I	42
TOTAL KVA. PER ø			166.07	166.96	155.95			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	488.98	–	–	588	–

PANEL NAME: HEQDPA | SIZE: 1000 AMP | KAIC RATING: 36 KAIC
VOLTAGE: 277/480V, 3ø, 4W | MAIN BKR.: MLO | CONNECTED: 825.6 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	L1EQA	175A/3P	32.54 / 7.56			60A/3P	L2EQA	2
3	112.5 KVA XFRMER	I		35.01 / 9.4		I	30 KVA XFRMER	4
5	I	I			33.14 / 8.1	I	I	6
7	LKEQ1	125A/3P	25.87 / ---			–	SPACE	8
9	75 KVA XFRMER	I		26.43 / ---		–	SPACE	10
11	I	I			25.04 / ---	–	SPACE	12
13	H1EQA	400A/3P	85.2 / 75.8			400A/3P	CHILLER ACC-1	14
15	I	I		85.2 / 75.8		I	I	16
17	I	I			85.2 / 75.8	I	I	18
19	SPARE	225A/3P	---/---				SPACE	20
21	I	I		---/---			SPACE	22
23	I	I			---/---		SPACE	24
25	SPACE		---/---			100A/3P	SPD	26
27	SPACE			---/---		I	I	28
29	SPACE				---/---	I	I	30
TOTAL KVA. PER ø			226.97	231.84	227.28			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	686.09	–	–	825.6	–

PANEL NAME: H1CRA | SIZE: 100 AMPS | KAIC RATING: 24 KAIC
VOLTAGE: 277/480V, 3ø, 4w | MAIN BKR.: MLO | CONNECTED: 42 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	L-SURGERY/RAD	20A/1P	1.5 / ---			20A/1P	SPARE	2
3	L-OR/PROCEDURE	20A/1P		1.44 / ---		20A/1P	SPARE	4
5	L-SPECIALTY/ADMIN	20A/1P			1.58 / ---	20A/1P	SPARE	6
7	OR ISO PANEL 1	25A/1P	5 / ---			20A/1P	SPARE	8
9	OR ISO PANEL 2	25A/1P		5 / ---		20A/1P	SPARE	10
11	TRAUMA 1 ISO PNL 1	25A/1P			5 / ---	20A/1P	SPARE	12
13	TRAUMA 1 ISO PNL 2	25A/1P	5 / ---				SPACE	14
15	TRAUMA 2 ISO PNL 1	25A/1P		5 / ---			SPACE	16
17	TRAUMA 2 ISO PNL 2	25A/1P			5 / ---		SPACE	18
19	SPARE	20A/1P	---/---				SPACE	20
21	SPARE	20A/1P		---/---			SPACE	22
23	SPARE	20A/1P			---/---		SPACE	24
25	SPACE		---/---			30A/1P	SPD	26
27	SPACE			---/---		I	I	28
29	SPACE				---/---	I	I	30
TOTAL KVA. PER ø			11.5	11.44	11.58			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	34.52	–	–	42	–

PANEL NAME: HLSDP | SIZE: 225 AMP | KAIC RATING: 36 KAIC
VOLTAGE: 277/480V, 3ø, 4W | MAIN BKR.: MLO | CONNECTED: 10 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	LIGHTS-SURGERY/RAD	20A/1P	.9 / .61			60A/3P	PANEL L1LSA	2
3	LIGHTS-PATIENT WING	20A/1P		.74 / .62		I	30KVA XFRMER	4
5	LIGHTS-ADMIN	20A/1P			.79 / .12	I	I	6
7	LIGHTS-OR/PROCEDURE	20A/1P	.74 / .45			60A/3P	PANEL L2LSA	8
9	LIGHTS – EXT. EGRESS	20A/1P		.43 / .32		I	30KVA XFRMER	10
11	SPARE	20A/1P			.24	I	I	12
13	SPARE	20A/1P	---/---				SPACE	14
15	SPARE	20A/1P		---/---			SPACE	16
17	SPARE	20A/1P			---/---		SPACE	18
19	SPACE		---/---				SPACE	20
21	SPACE			---/---			SPACE	22
23	SPACE				---/---		SPACE	24
25	SPACE		---/---			30A/3P	SPD	26
27	SPACE			---/---		I	I	28
29	SPACE				---/---	I	I	30
TOTAL KVA. PER ø			4.31	2.68	1.15			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	8.14	–	–	10	–

PANEL NAME: HXRDP | SIZE: 400 AMP | KAIC RATING: 36 KAIC
VOLTAGE: 277/480V, 3ø, 4W | MAIN BKR.: MLO | CONNECTED: 315 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	CT SCANNER	150A/3P	45 / 42.3			60A/3P	X-RAY	2
3	I	I		45 / 42.3		I	I	4
5	I	I			45 / 42.3	I	I	6
7	SPARE	125A/3P	---/---				SPACE	8
9	I	I		---/---			SPACE	10
11	I	I			---/---		SPACE	12
13	SPACE		---/---				SPACE	14
15	SPACE			---/---			SPACE	16
17	SPACE				---/---		SPACE	18
19	SPACE		---/---				SPACE	20
21	SPACE			---/---			SPACE	22
23	SPACE				---/---		SPACE	24
25	SPACE		---/---			60A/3P	SPD	26
27	SPACE			---/---		I	I	28
29	SPACE				---/---	I	I	30
TOTAL KVA. PER ø			87.3	87.3	87.3			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	261.90	–	–	315	–

PANEL NAME: H1NB | SIZE: 100 AMP | KAIC RATING: 24 KAIC
VOLTAGE: 277/480V, 3ø, 4W | MAIN BKR.: MLO | CONNECTED: 75 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	AHU-3	20A/3P	3.4 / 3.4			20A/3P	AHU-7	2
3	I	I		3.4 / 3.4		I	I	4
5	I	I			3.4 / 3.4	I	I	6
7	AHU-8	70A/3P	13.85 / ---			–	SPACE	8
9	I	I		13.85 / ---		–	SPACE	10
11	I	I			13.85 / ---	–	SPACE	12
13	HRP-01	15A/3P	.72 / ---			15A/3P	HRP-02	14
15	I	I		.72 / .72		I	I	16
17	I	I			.72 / .72	I	I	18
19	SPARE	20A/1P	---/---			20A/1P	SPARE	20
21	SPARE	20A/1P		---/---		20A/1P	SPARE	22
23	SPARE	20A/1P			---/---	20A/1P	SPARE	24
25	SPARE	20A/1P	---/---			20A/1P	SPARE	26
27	SPARE	20A/1P		---/---		20A/1P	SPARE	28
29	SPARE	20A/1P			---/---	20A/1P	SPARE	30
TOTAL KVA. PER ø			22.09	22.09	22.09			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	62.27	–	–	75	–

PANEL NAME: HCRDP | SIZE: 600 AMP | KAIC RATING: 36 KAIC
VOLTAGE: 277/480V, 3ø, 4W | MAIN BKR.: MLO | CONNECTED: 193 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND: 193 AMPS

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	H1CRA	100A/3P	11.5 / 3.08			100A/3P	H2CRA	2
3	I	I		11.44 / 2.03		I	I	4
5	I	I			11.58 / 1.81	I	I	6
7	L1CRA	60A/3P	5.82 / 21.16			70A/3P	L2CRA	8
9	30 KVA XFRMER	I		6.24 / 19.85		I	45 KVA XFRMER	10
11	I	I			4.12 / 18.78	I	I	12
13	UPS	60A/3P	7.5 / ---			100A/3P	SPARE	14
15	30 KVA XFRMER	I		7.5 / ---		I	I	16
17	I	I			7.5 / ---	I	I	18
19	SPARE	100A/3P	--- / 9.21			60A/3P	L2CRB	20
21	I	I		--- / 6.5		I	30 KVA XFRMER	22
23	I	I			--- / 5.1	I	I	24
25	SPACE		---/---				SPACE	26
27	SPACE			---/---			SPACE	28
29	SPACE				---/---		SPACE	30
31	SPACE		---/---				SPACE	32
33	SPACE			---/---			SPACE	34
35	SPACE				---/---		SPACE	36
37	SPACE		---/---			60A/3P	SPD	38
39	SPACE			---/---		I	I	40
41	SPACE				---/---	I	I	42
TOTAL KVA. PER ø			58.27	53.56	48.84			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	160.67	–	–	193	–

PANEL NAME: H1NA | SIZE: 100 AMP | KAIC RATING: 24 KAIC
VOLTAGE: 277/480, 3ø, 4w | MAIN BKR.: MLO | CONNECTED: 10 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	B	C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	L-ADMIN	20A/1P	.911 / 1.41			20A/1P	L-SURGERY/RADIOLOGY	2
3	L-SPECIALTY	20A/1P		1.56 / 1.55		20A/1P	L-PURCHASE/MECH.	4
5	L-DIETARY/DINNING	20A/1P			1.23 / 1.34	20A/1P	L-OR/PROCEDURE	6
7	SPARE	20A/1P	---/.57			20A/1P	L-WEST CORR 005	8
9	SPARE	20A/1P		---/---		20A/1P	SPARE	10
11	SPARE	20A/1P			---/---	20A/1P	SPARE	12
13	SPARE	20A/1P	---/---				SPACE	14
15	SPARE	20A/1P		---/---			SPACE	16
17	SPARE	20A/1P			---/---		SPACE	18
19	SPACE		---/---				SPACE	20
21	SPACE			---/---			SPACE	22
23	SPACE				---/---		SPACE	24
25	SPACE		---/---			30A/3P	SPD	26
27	SPACE			---/---		I	I	28
29	SPACE				---/---	I	I	30
TOTAL KVA. PER ø			2.89	3.11	2.57			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	8.57	–	–	10	–

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Revisions: 1 ADDENDUM #1 DECEMBER 18, 2019
2 ADDENDUM #3 JANUARY 8, 2020

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: MLL
Checked: JDR

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Sheet Number : E005 - ELECTRICAL SCHEDULES

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REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

3" = 1'-0" GRAPHIC SCALE
1 1/2" = 1'-0" GRAPHIC SCALE
1" = 1'-0" GRAPHIC SCALE
3/4" = 1'-0" GRAPHIC SCALE
1/2" = 1'-0" GRAPHIC SCALE
1/4" = 1'-0" GRAPHIC SCALE
1/8" = 1'-0" GRAPHIC SCALE

PANEL NAME: L1NB | SIZE: 100 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 100 AMP | CONNECTED: 99 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND: 73 AMPS

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	R-OFFICE 012	20A/1P	1.08 / 1.5			20A/1P	R-WASHER	2
3	R- 703 PRINT, 703	20A/1P		1.44 / 2.5		30A/2P	R-DRYER	4
5	R-703 PRINT, 701, 704	20A/1P			.9 / 2.5	I	I	6
7	R-CORR 100,PURCH. 702	20A/1P	.72 / 1.5			20A/1P	HRCH-01 LIGHTS	8
9	SPARE	20A/1P		.9 / 1.5		20A/1P	AHU-3 LIGHTS/RECEP	10
11	EF-03	15A/1P			.53 / 1.5	20A/1P	AHU-8 LIGHTS/RECEP	12
13	EF-07	15A/1P	.53 / 1.5			20A/1P	AHU-7 LIGHTS/RECEP	14
15	EF-08	15A/2P		.72 / 1.7		30A/1P	EF-15	16
17	I	I			.72 / 1.5	20A/1P	R-OR 621	18
19	EF-10	15A/1P	.53 / 1.5			20A/1P	R-OR 621	20
21	EF-04	15A/1P		.7 / 1.5		20A/1P	R-MINOR PROC. 623	22
23	EF-10	15A/1P			.7 / 1.5	20A/1P	R-MINOR PROC. 623	24
25	R-EMS STOR., MECH.	20A/1P	.9 / ---			20A/1P	SPARE	26
27	R-MECH.,ELEC.	20A/1P		1.08 / ---		20A/1P	SPARE	28
29	R-PURCHASING COFFEE	20A/1P			1.5 / ---	20A/1P	SPARE	30
31	R-PURCHASING MICRO	20A/1P	1.0 / ---			20A/1P	SPARE	32
33	SPARE	20A/1P		--- / ---		20A/1P	SPARE	34
35	SPARE	20A/1P			--- / ---	20A/1P	SPARE	36
37	SPARE	20A/1P	--- / ---			30A/3P	SPD	38
39	SPARE	20A/1P		--- / ---		I	I	40
41	SPARE	20A/1P			--- / ---	I	I	42
TOTAL KVA. PER ø			12.26	12.04	11.35			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	6	–	6	–	–
RECEPTACLES	18.95	.5	9.48	–	–
A/C	–	–	–	–	–
EXHAUST FANS	4.2	–	4.2	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	6.5	–	6.5	–	–
TOTAL LOAD	35.65	–	26.18	99	73

PANEL NAME: L1CRA | SIZE: 100 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 100 AMP | CONNECTED: 42 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	R-CONTROL 503	20A/1P	.72 / 1.5			20A/1P	R-BONE DENSITY	2
3	R-RAD TECH	20A/1P		.72 / 1.5		20A/1P	R-COPY	4
5	R-ANES. PHY.	20A/1P			.54 / 1.5	20A/1P	R-ULTRASOUND	6
7	R-PRE 609	20A/1P	.54 / .54			20A/1P	R-POST 629	8
9	R-PRE 608	20A/1P		.54 / .54		20A/1P	R-POST 628	10
11	R-PRE 607	20A/1P			.54 / .54	20A/1P	R-POST 627	12
13	R-OR NURSE	20A/1P	.72 / .9			20A/1P	R-201,202,203	14
15	R-OR OFF., CART	20A/1P		.54 / 1.5		20A/1P	R-201 COPY	16
17	R-REC.,ADMIN,CEO,CFO	20A/1P			1.26 / 1.0	20A/1P	R-NURSE 203 PRINT	18
19	R-MINOR PROCEDURE	20A/1P	.36 / .9			20A/1P	R-EXAM 206,207,208	20
21	R-MINOR PROCEDURE	20A/1P		.72 / .9		20A/1P	R-EXAM 210,211,212	22
23	R-MINOR PROCEDURE	20A/1P			.9 / .5	20A/2P	L-MINOR PROCEDURE	24
25	SPARE	20A/1P	--- / ---			I	GFCI	26
27	SPARE	20A/1P		--- / ---		20A/1P	SPARE	28
29	SPARE	20A/1P			--- / ---	20A/1P	SPARE	30
31	SPARE	20A/1P	--- / ---			20A/1P	SPARE	32
33	SPARE	20A/1P		--- / ---		20A/1P	SPARE	34
35	SPARE	20A/1P			--- / ---	20A/1P	SPARE	36
37	SPARE	20A/1P	--- / ---			30A/3P	SPD	38
39	SPARE	20A/1P		--- / ---		I	I	40
41	SPARE	20A/1P			--- / I	I	I	42
TOTAL KVA. PER ø			5.82	6.24	4.12			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	15.06	–	–	42	–

PANEL NAME: L1LSA | SIZE: 100 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4w | MAIN BKR.: 100 AMP | CONNECTED: 3.8 AMPS
MOUNTING: SURFACE | LOCATION: ELEC 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	OR MED GAS ALARM	20A/1P	.36 / .25			20A/1P	FIRE PROT. RISER BELL	2
3	RAD MED GAS ALARM	20A/1P		.12 / .5		20A/1P	FIRE ALARM PANEL	4
5	MAINT MED GAS ALARM	20A/1P			.12 / ---	20A/1P	SPARE	6
7	SPARE	20A/1P	--- / ---			20A/1P	SPARE	8
9	SPARE	20A/1P		--- / ---		20A/1P	SPARE	10
11	SPARE	20A/1P			--- / ---	20A/1P	SPARE	12
13	SPARE	20A/1P	--- / ---				SPACE	14
15	SPARE	20A/1P		--- / ---			SPACE	16
17	SPARE	20A/1P			--- / ---		SPACE	18
19	SPACE		--- / ---				SPACE	20
21	SPACE			--- / ---			SPACE	22
23	SPACE				--- / ---		SPACE	24
25	SPACE		--- / ---			30A/3P	SPD	26
27	SPACE			--- / ---		I	I	28
29	SPACE				--- / ---	I	I	30
TOTAL KVA. PER ø			.61	.62	.12			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	1.35	–	–	3.8	–

PANEL NAME: L1EQA | SIZE: 400 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 400 AMP | CONNECTED: 280 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 710 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	VAV-RADIOLOGY	20A/1P	.84 / 1.22			20A/1P	WH-01 & WH-02	2
3	VAV-OR SUITE	20A/1P		.84 / 1.2		20A/1P	WATER TREATMENT	4
5	MED GAS MANIFOLD	20A/1P			.5 / .72	20A/1P	WATER TREATMENT	6
7	EMS	20A/1P	.5 / 1.5			20A/1P	AHU-1 LIGHTS/RECEP	8
9	HEAT TRACE KITCHEN	20A/2P		.1 / 1.5		20A/1P	AHU-2 LIGHTS/RECEP	10
11	GFCI	I			--- / 1.5	20A/1P	AHU-4 LIGHTS/RECEP	12
13	HEAT TRACE ACC-1	20A/2P	1.8 / 1.5			20A/1P	AHU-5 LIGHTS/RECEP	14
15	GFCI	I		--- / 1.5		20A/1P	AHU-6 LIGHTS/RECEP	16
17	HEAT TRACE ACC-2	20A/2P			1.8 / 1.5	20A/1P	AHU-9 LIGHTS/RECEP	18
19	GFCI	I	--- / 1.14			20A/1P	STERILIZER 45 CONTROLS	20
21	B-01	30A/1P		2.4 / 1.92		20A/1P	STERILIZER 50	22
23	B-02	30A/1P			2.4 / 1.8	20A/1P	R-STAFF BREAK REF.	24
25	CP-01A	15A/2P	.72 / .72			15A/2P	PHCP-01	26
27	I	I		.72 / .72		I	I	28
29	CP-01B	15A/2P			.72 / .57	15A/1P	PHCP-02	30
31	I	I	.72 / .57			15A/1P	PHCP-04	32
33	CP-02A	15A/1P		--- / .57		15A/1P	PHCP-05	34
35	CP-02B	15A/1P			--- / .57	15A/1P	PHCP-06	36
37	SPARE	20A/1P	--- / .57			15A/1P	PHCP-09	38
39	SPARE	20A/1P		--- / 2.04		30A/1P	HUM-01	40
41	SPARE	20A/1P			--- / 1.98	30A/1P	HUM-02	42
43	R-PURCHASING U.C. REF	20A/1P	.5 / 2.1			40A/2P	EF-03	44
45	EF-02	20A/1P		1.2 / 2.1		I	I	46
47	EF-05	15A/1P			.48 / .7	15A/1P	EF-06	48
49	EF-07	15A/1P	.7 / .48			15A/1P	EF-17	50
51	EF-08	20A/1P		1.2 / .7		15A/1P	KEF-02	52
53	EF-09	30A/1P			1.92 / .5	20A/1P	R-CORR. 113 REF.	54
55	OXYGEN YARD	20A/1P	1.5 / 1.8			20A/1P	R-BREAK 016 REF.	56
57	OXYGEN YARD	20A/1P		1.5 / 2.5		30A/2P	BLOCK HEATER	58
59	SPARE	20A/1P			--- / 2.5	I	I	60
61	SPARE	20A/1P	--- / 1.0			20A/1P	BATTERY CHARGER	62
63	SPARE	20A/1P		--- / ---		20A/1P	SPARE	64
65	SPARE	20A/1P			--- / ---	20A/1P	SPARE	66
67	SPARE	20A/1P	--- / ---			20A/1P	SPARE	68
69	SPARE	20A/1P		--- / ---		20A/1P	SPARE	70
71	SPARE	20A/1P			--- / ---	20A/1P	SPARE	72
73	SPACE		--- / ---				SPACE	74
75	SPACE			--- / ---			SPACE	76
77	SPACE				--- / ---		SPACE	78
79	SPACE		--- / ---			30A/3P	SPD	80
81	SPACE			--- / ---		I	I	82
83	SPACE				--- / ---	I	I	84
TOTAL VA. PER ø			32.54	35.01	33.14			

A3

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	100.69	–	–	280	–

PANEL NAME: L1M | SIZE: 100 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 100 AMP | CONNECTED: 67.5 AMPS
MOUNTING: SURFACE | LOCATION: MAINT/WK ROOM 705 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	WELDER	60A/3P	5.7 / .54			20A/1P	RECEPS-BIO/WK. ROOM	2
3	I	I		5.7 / .9		20A/1P	OFFICE RECEPS	4
5	I	I			5.7 / 1.5	20A/1P	TLT RECEP	6
7	WALL RECEPS	20A/1P	.72 / ---			20A/1P	SPARE	8
9	WALL RECEPS	20A/1P		.54 / ---		20A/1P	SPARE	10
11	CABLE REEL	20A/1P			1.5 / ---	20A/1P	SPARE	12
13	CABLE REEL	20A/1P	1.5 / ---			20A/1P	SPARE	14
15	SPARE	20A/1P		--- / ---		20A/1P	SPARE	16
17	SPARE	20A/1P			--- / ---	20A/1P	SPARE	18
19	SPARE	20A/1P	--- / ---			20A/1P	SPARE	20
21	SPARE	20A/1P		--- / ---		20A/1P	SPARE	22
23	SPARE	20A/1P			--- / ---	20A/1P	SPARE	24
25	SPARE	20A/1P	--- / ---			30A/3P	SPD	26
27	SPARE	20A/1P		--- / ---		I	I	28
29	SPARE	20A/1P			--- / ---	I	I	30
TOTAL KVA. PER ø			8.46	7.14	8.7			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	24.3	–	–	67.5	–

PANEL NAME: H3NA | SIZE: 125 AMP | KAIC RATING: 24 KAIC
VOLTAGE: 277/480V, 3ø, 4w | MAIN BKR.: MLO | CONNECTED: 44.4 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 1149 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	L-EXAM WEST/CORE	20A/1P	1.83 / 13.08			60A/3P	PANEL L3NA	2
3	L-EAST,CORR.,ADMIN,WAIT	20A/1P		1.13 / 11.64		I	30 KVA XFRMR	4
5	SPARE	20A/1P			--- / 10.24	I	I	6
7	SPARE	20A/1P	--- / ---			20A/1P	SPARE	8
9	SPARE	20A/1P		--- / ---		20A/1P	SPARE	10
11	SPARE	20A/1P			--- / ---	20A/1P	SPARE	12
13	SPACE		--- / ---				SPACE	14
15	SPACE			--- / ---			SPACE	16
17	SPACE				--- / ---		SPACE	18
19	SPACE		--- / ---				SPACE	20
21	SPACE			--- / ---			SPACE	22
23	SPACE				--- / ---	20A/1P	SPACE	24
25	SPACE		--- / ---			30A/3P	SPD	26
27	SPACE			--- / ---		I	I	28
29	SPACE				--- / ---	I	I	30
TOTAL KVA. PER ø			13.91	12.77	10.24			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	36.92	–	–	44.4	–

PANEL NAME: LKEQ1 | SIZE: 400 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 250 AMP | CONNECTED: 249 AMPS
MOUNTING: FLUSH | LOCATION: KITCHEN | DEMAND: 162 AMPS

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	DISPOSER 1	15A/3P	.72 / .72			15A/3P	DISPOSER 3	2
3	I	I		1.72 / .72		I	I	4
5	I	I			.72 / .72	I	I	6
7	DISPOSER 3	15A/3P	.72 / .83			20A/1P	R-REFRIGERATOR	8
9	I	I		.72 / .83		20A/1P	R-REFRIGERATOR	10
11	I	I			.72 / .8	20A/1P	R-FREEZER	12
13	R-ICE MAKER	20A/1P	.85 / 1.0			20A/1P	R-CAN OPENER	14
15	HEATED ROLL THRU CAB	15A/2P		.75 / 1.68		20A/1P	R-MICROWAVE	16
17	I	I			.75 / 1.5	20A/1P	R-COFFEE	18
19	SPARE	20A/1P	--- / 2.6			30A/2P	PELLET CHARGER	20
21	SPARE	20A/1P		--- / 2.6		I	I	22
23	R-ROLL-THRU REF.	20A/1P			1.92 / 1.1	15A/2P	MOBILE PLATE DISP.	24
25	R-FOOD PROCESSOR	20A/1P	.5 / 1.1			I	I	26
27	COOLER CU CCU-1	20A/2P		1.58 / .72		20A/1P	R-CONVENIENCE	28
29	I	I			1.58 / .84	20A/1P	R-OFFICE, U.C. REF.	30
31	FREEZER CU FCU-1	40A/2P	2.75 / 3.4			60A/3P	HOOD DIST. SYSTEM	32
33	I	I		2.75 / 3.4		I	I	34
35	SPARE	20A/1P			--- / 3.4	I	I	36
37	HIGH TEMP DISH	100A/3P	6.6 / 1.2			20A/1P	SECURITY GRILL	38
39	I	I		6.6 / 1.53		20A/1P	FREEZE EVAP, DEF. LIGHT	40
41	I	I			6.6 / .24	20A/1P	COOLER EVAP, LIGHTS	42
43	DISH MACHINE BOOSTER	30A/3P	3.0 / ---			20A/1P	SPARE	44
45	I	I		3.0 / ---		20A/1P	SPARE	46
47	I	I			3.0 / .36	20A/1P	R-POS/CONVENIENCE	48
49	SPARE	20A/1P	--- / 1.5			20A/1P	R-DRINKS/COFFEE	50
51	SPARE	20A/1P		--- / 1.5		20A/1P	R-DRINKS/COFFEE	52
53	SPARE	20A/1P			--- / 1.5	20A/1P	R-DRINKS/COFFEE	54
55	SPARE	20A/1P	--- / ---			30A/3P	SPD	56
57	SPARE	20A/1P		--- / ---		I	I	58
59	SPARE	20A/1P			--- / ---	I	I	60
61	WK TABLE HOT WELL	30A/2P	1.65 / ---			20A/2P	SPARE	62
63	I	I		1.65 / ---		I	I	64
65	SERVING LINE HOT WELL	30A/2P			2.1 / ---	20A/1P	SPARE	66
67	I	2.1	--- / ---			20A/1P	SPARE	68
69	SERVING LINE COLD WELL	20A/1P		.96 / ---		20A/1P	SPARE	70
71	SPARE	20A/1P			--- / ---	20A/1P	SPARE	72
73	SPACE		--- / ---				SPACE	74
75	SPACE			--- / ---			SPACE	76
77	SPACE				--- / ---		SPACE	78
79	SPACE		--- / ---				SPACE	80
81	SPACE			--- / ---			SPACE	82
83	SPACE				--- / ---		SPACE	84
TOTAL VA. PER ø			29.14	32.71	27.85			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	89.7	.65	58	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	89.7	–	58	249	162

PANEL NAME: L2NC | SIZE: 100 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 100 AMP | CONNECTED: 14.8 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 941 | DEMAND:

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	R-BREAK 956 MICRO	20A/1P	1.5 / .83			20A/1P	CLASS 121 SHADES	2
3	R-BREAK 956 MICRO	20A/1P		1.5 / 1.0		20A/1P	SITE SIGN	4
5	R-BREAK 956 COFFEE	20A/1P			1.5 / 1.0	20A/1P	SITE SIGN	6
7	SPARE	20A/1P	--- / ---			20A/1P	SPARE	8
9	SPARE	20A/1P		--- / ---		20A/1P	SPARE	10
11	SPARE	20A/1P			--- / ---	20A/1P	SPARE	12
13	SPARE	20A/1P	--- / ---			20A/1P	SPARE	14
15	SPARE	20A/1P		--- / ---		20A/1P	SPARE	16
17	SPARE	20A/1P			--- / ---	20A/1P	SPARE	18
19	SPACE		--- / ---				SPACE	20
21	SPACE			--- / ---			SPACE	22
23	SPACE				--- / ---		SPACE	24
25	SPACE		--- / ---			30A/3P	SPD	26
27	SPACE			--- / ---		I	I	28
29	SPACE				--- / ---	I	I	30
TOTAL KVA. PER ø			2.33	1.5	1.5			

A3

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	–	–	–	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	5.33	–	–	14.8	–

PANEL NAME: L3NA | SIZE: 100 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 100 AMP | CONNECTED: 97 AMPS
MOUNTING: SURFACE | LOCATION: ELEC. 1149 | DEMAND: 50 AMPS

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	R-OFFICE 1219	20A/1P	.72 / 1.08			20A/1P	R-1215	2
3	R-WAITING	20A/1P		1.08 / 1.08		20A/1P	R-1214	4
5	R-EDF	20A/1P			1.0 / 1.08	20A/1P	R-1213	6
7	R-REF.	20A/1P	1.5 / 1.08			20A/1P	R-NURSE	8
9	R-MICRO	20A/1P		1.0 / 1.0		20A/1P	R-PRINTER	10
11	R-COFFEE	20A/1P			1.5 / 1.08	20A/1P	R-MED, DICT.	12
13	R-TRIAGE	20A/1P	1.26 / 1.8			20A/1P	R-LAB REF.	14
15	R-1203	20A/1P		1.08 / 1.8		20A/1P	R-LAB REF.	16
17	R-1204	20A/1P			1.08 / .9	20A/1P	R-LAB ISLAND	18
19	R-1205	20A/1P	1.08 / 1.5			20A/1P	R-COFFEE	20
21	R-1207	20A/1P		.72 / 1.0		20A/1P	R-MICRO	22
23	R-1207	20A/1P			.72 / 1.8	20A/1P	R-REF.	24
25	R-CORR.	20A/1P	.9 / 1.08			20A/1P	R-WORK RM.	26
27	R-STOR.,UTIL.	20A/1P		1.08 / .72		20A/1P	R-CHECK-IN	28
29	R-BREAK, EMS	20A/1P			1.08 / .5	20A/1P	L-PROCEDURE	30
31	R-EMS CHARGERS	20A/1P	1.08 / ---			20A/1P	SPARE	32
33	VAVS	20A/1P		1.08 / ---		20A/1P	SPARE	34
35	MOTORIZED DOOR	20A/1P			.5 / ---	20A/1P	SPARE	36
37	SPARE	20A/1P	--- / ---			30A/3P	SPD	38
39	SPARE	20A/1P		--- / ---		I	I	40
41	SPARE	20A/1P			--- / ---	I	I	42
TOTAL KVA. PER ø			13.08	11.64	11.24			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	.5	–	.5	–	–
RECEPTACLES	33.88	.5	17.19	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	1.08	–	1.08	–	–
TOTAL LOAD	36.98	–	18.77	100	52

A3
NOTE: PROVIDE SUB-FEED LUGS

PANEL NAME: L1NA | SIZE: 150 AMP | KAIC RATING: 22 KAIC
VOLTAGE: 120/208V, 3ø, 4W | MAIN BKR.: 150 AMP | CONNECTED: 194 AMPS
MOUNTING: SURFACE | LOCATION: ELEC 710 | DEMAND: 97 AMPS

CIR. NO.	LOAD	BREAKER AMPS/POLES	LOAD kVA/PHASE A	LOAD kVA/PHASE B	LOAD kVA/PHASE C	BREAKER AMPS/POLES	LOAD	CIR. NO.
1	R-XRAY	20A/1P	.9 / .72			20A/1P	R-RADIOLOGY OFF.	2
3	R-CT	20A/1P		1.08 / .72		20A/1P	R-RADIOLOGY TECH.	4
5	R-RAD CORRIDOR	20A/1P			1.08 / .72	20A/1P	R-RAD STOR., UTILITY	6
7	R-WAIT/BONE	20A/1P	1.08 / 1.02			20A/1P	R-PRE 609 HW	8
9	R-ULTRASOUND	20A/1P		1.5 / 1.02		20A/1P	R-PRE 608 HW	10
11	R-609,608	20A/1P			.72 / 1.02	20A/1P	R-PRE 607 HW	12
13	R-608,607	20A/1P	1.08 / 1.02			20A/1P	R-POST 629 HW	14
15	R-627,628,629	20A/1P		1.08 / 1.02		20A/1P	R-POST 628 HW	16
17	R-ULITITY,TLT	20A/1P			.72 / 1.02	20A/1P	R-POST 627 HW	18
19	R-OR CORRIDOR	20A/1P	1.08 / .9			20A/1P	R-EQ, UTIL., PHY.	20
21	R-OR NURSE	20A/1P		.72 / .9		20A/1P	R-PHY., BREAK	22
23	R-OR OFF, NOUR.	20A/1P			.72 / 1.0	20A/1P	R-MICRO	24
25	R-SCOPE	20A/1P	.72 / 1.5			20A/1P	R-COFFEE	26
27	R-DECON.,STER. STOR.	20A/1P		.72 / 1.5		20A/1P	R-PHY. MEN'S SHOWER	28
29	SPARE	20A/1P			--- / 1.5	20A/1P	R-PHY. WOMEN'S SHOWER	30
31	R-CORR 004,1143	20A/1P	.9 / .96			20A/1P	VAV-IOP, ADMIN.	32
33	R-CORR 219,220,221	20A/1P		1.08 / .96		20A/1P	VAV-ADMIN.	34
35	R-CORR 005,400	20A/1P			1.08 / .84	20A/1P	VAV-SPECIALTY	36
37	SPARE	20A/1P	--- / 1.08			20A/1P	VAV-DIETARY/PURCH.	38
39	SPARE	20A/1P		--- / ---		20A/1P	SPARE	40
41	SPARE	20A/1P			--- / ---	20A/1P	SPARE	42
43	R-OFFICE 104	20A/1P	1.08 / 1.44			20A/1P	R-105 COPY	44
45	R-101,101,105	20A/1P		.9 / 1.18		20A/1P	R-105 PRINT	46
47	R-NURSE 203	20A/1P			.9 / 1.8	20A/1P	R-MAIL 102	48
49	R-204,213,214,215,216	20A/1P	.9 / .9			20A/1P	R-103, 105	50
51	R-EXAM 211,212	20A/1P		.9 / .9		20A/1P	R-105, 106	52
53	R-EXAM 210,211	20A/1P			.72 / .9	20A/1P	R-102, 103	54
55	R-UTIL, OFFICE	20A/1P	.9 / 1.08			20A/1P	R-CEO 115, 116	56
57	R-OFFICE, RECEPTION	20A/1P		.9 / 1.5		20A/1P	R-TLT. 114, 117	58
59	R-WAIT 200	20A/1P			1.08 / .9	20A/1P	R-WK ROOM 109	60
61	R-ENV. 018	20A/1P	.9 / 1.08			20A/1P	R-DINING	62
63	R-020, 026, 027	20A/1P		1.08 / .72		20A/1P	R-CFO 118	64
65	R-OFFICE 028	20A/1P			1.08 / 1.08	20A/1P	R-CONF. 120	66
67	R-021, 023	20A/1P	1.26 / .72			20A/1P	R-206,207	68
69	R-COPIER	20A/1P		1.0 / .72		20A/1P	R-EXT., 208, EQ. 209	70
71	R-021	20A/1P			1.26 / ---	20A/1P	SPARE	72
73	R-016 MICRO	20A/1P	1.0 / ---			20A/1P	SPARE	74
75	R-016 COFFEE	20A/1P		1.5 / ---		20A/1P	SPARE	76
77	R-UTIL.,BREAK,TLT.	20A/1P			1.08 / ---	20A/1P	SPARE	78
79	SPARE	20A/1P	--- / ---			30A/3P	SPD	80
81	SPARE	20A/1P		--- / I		I	I	82
83	SPARE	20A/1P			--- / ---	I	I	84
TOTAL VA. PER ø			24.02	22.1	21.22			

	CONNECTED KVA	DIVERSITY	DEMAND KVA	CONNECTED AMPS	DEMAND AMPS
LIGHTS	–	–	–	–	–
RECEPTACLES	69.84	.5	34.92	–	–
A/C	–	–	–	–	–
ELECTRIC HEAT	–	–	–	–	–
KITCHEN EQUIPMENT	–	–	–	–	–
MISCELLANEOUS LOAD	–	–	–	–	–
TOTAL LOAD	69.84	–	34.92	194	97

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Project No: 18015 Revisions: A1 ADDENDUM #1 DECEMBER 18, 2019
Date: 4 DECEMBER 2019 A3 ADDENDUM #3 JANUARY 8, 2020
Drawn: MLL
Checked: JDR

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

JON D. RICE REGISTERED PROFESSIONAL ENGINEER 11455 STATE OF MISSISSIPPI

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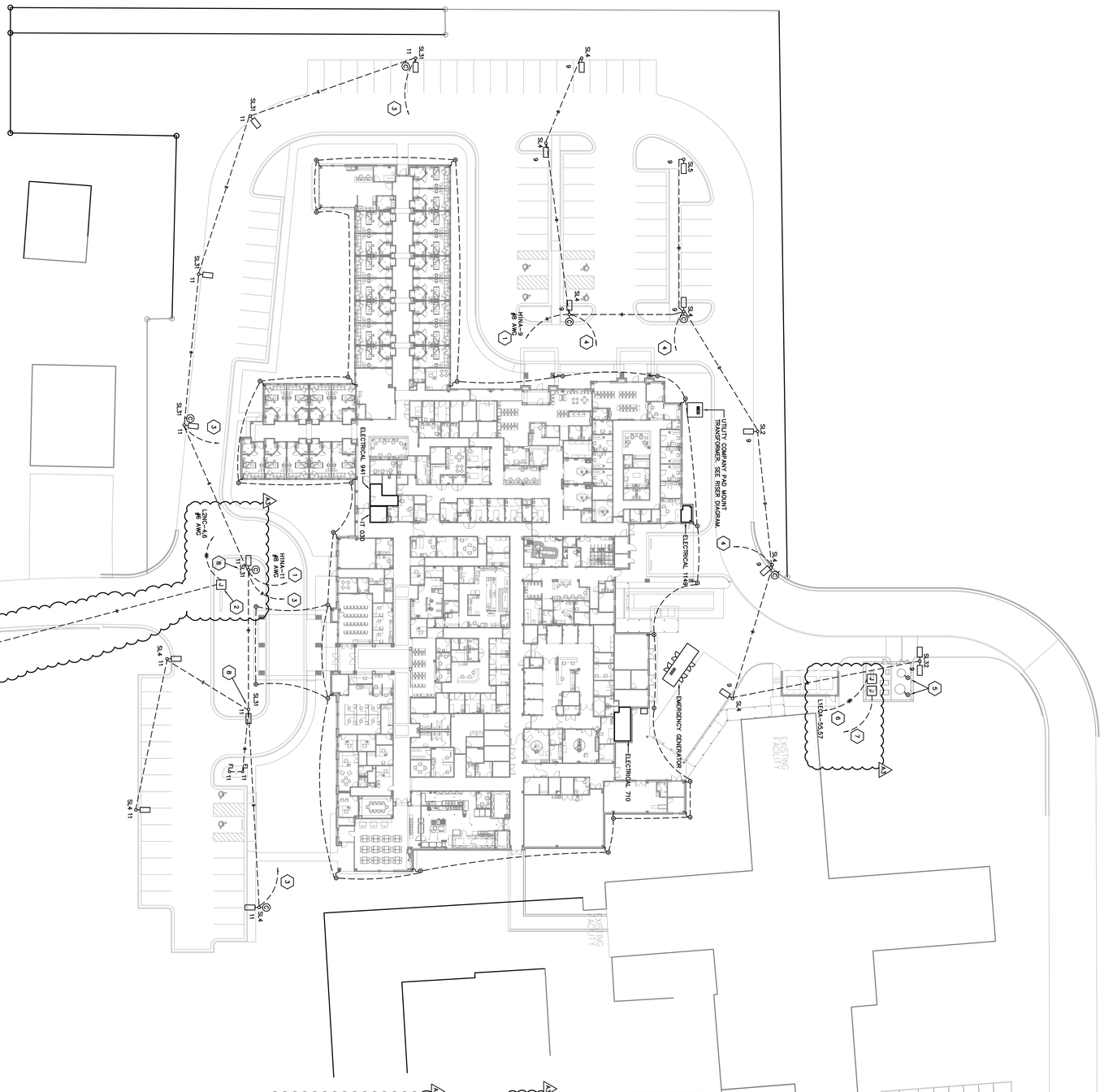
Sheet Number : • - ELECTRICAL SCHEDULES
E006

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

1/16" =1'-0" GRAPHIC SCALE
1/4" =1'-0" GRAPHIC SCALE
1/2" =1'-0" GRAPHIC SCALE
3/4" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
1 1/2" =1'-0" GRAPHIC SCALE
3" =1'-0" GRAPHIC SCALE



1 SITE PLAN - ELECTRICAL
E101 SCALE: 1"=30'-0"

GENERAL NOTE

GROUND LOOP AND GROUND RODS ARE SHOWN FOR PRICING PURPOSES ONLY. CONTRACTOR SHALL PERFORM ACTUAL SPACING OF GROUND RODS WITH LIGHTNING PROTECTION SYSTEM VENDOR PRIOR TO INSTALLATION.

KEYNOTES

1. HOMERUN TO PANEL LHAA IN ELECTRICAL ROOM 941, VIA ELECTRICAL CONTACTOR ("CR"). CONTACTOR SHALL BE CONTROLLED BY PHOTOCELL MOUNTED ON ROOF AND MANUAL SWITCH LOCATED AT FRONT DESK OFFICE OF LIGHT AT NIGHTTIME. SEE LIGHTING CONTROL DETAIL.
2. PROVIDE PAIR OF #8 INTERCONNECTED STUB-UPS FROM PANEL LHAA IN ELECTRICAL ROOM 941 TO SIGN. SIGN SHALL SIT ON CONCRETE PAD. COORDINATE EXACT LOCATION WITH OWNER AND GENERAL CONTRACTOR PRIOR TO ROUGH-IN.
3. SECURITY CAMERA SYSTEM EQUIPMENT RACK. PROVIDE 1" EMPTY CONDUIT FROM EQUIPMENT RACK IN I.T. ROOM 030, ROUTE CONDUITS AS STRAIGHT AND SHORT AS POSSIBLE.
4. A SECURITY CAMERA SHALL BE INSTALLED ON THAT POLE MOUNTED LIGHTING POLE HOMERUN ONE 1" EMPTY CONDUIT TO NETWORK RACK IN ELECTRICAL ROOM 1149. ROUTE CONDUITS AS STRAIGHT AND SHORT AS POSSIBLE.
5. PROVIDE 10' X 3/4" GROUND ROD AND BOND TO OXYGEN TANK WITH #4/0 COPPER GROUNDING CONDUCTOR.
6. PROVIDE (1) 120V CONNECTION TO SWITCHOVER DISCONNECT, AND (1) 120V CONNECTION TO EQUIPMENT FOR ALARM PANELS, SIGNAL AND LIGHTS. REFER TO EQUIPMENT VENDOR DRAWINGS FOR CLARIFICATION ON LOCATION OF DEVICES. COORDINATE ROUGH-INS WITH GENERAL CONTRACTOR.
7. PROVIDE 6-#12, IN 1" CONDUIT FOR ALARM PANELS. VERIFY LOCATION OF PANELS WITH ARCHITECT, AND TERMINATION POINTS AT OXYGEN PAD WITH CONTRACTOR PRIOR TO ROUGH-IN.
8. CONTRACTOR SHALL REMOVE EXISTING SIGN AT FRONT OF EXISTING HOSPITAL AND RELOCATE TO AREA INDICATED. SING SHALL BE INSTALLED ON CONCRETE PAD. COORDINATE NEW LOCATION, AND REINSTALLATION OF SIGN WITH OWNER AND GENERAL CONTRACTOR PRIOR TO ROUGH-IN.
9. CONTRACTOR SHALL REMOVE EXISTING SIGN AT FRONT OF EXISTING HOSPITAL AND RELOCATE TO AREA INDICATED. SING SHALL BE INSTALLED ON CONCRETE PAD. COORDINATE NEW LOCATION, AND REINSTALLATION OF SIGN WITH OWNER AND GENERAL CONTRACTOR PRIOR TO ROUGH-IN.

- SITE PLAN - ELECTRICAL

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Sheet Number : E101

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL

RIPLEY, MISSISSIPPI

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: MLL
Checked: JDR

Revisions: 3 ADDENDUM #3 JANUARY 8, 2020

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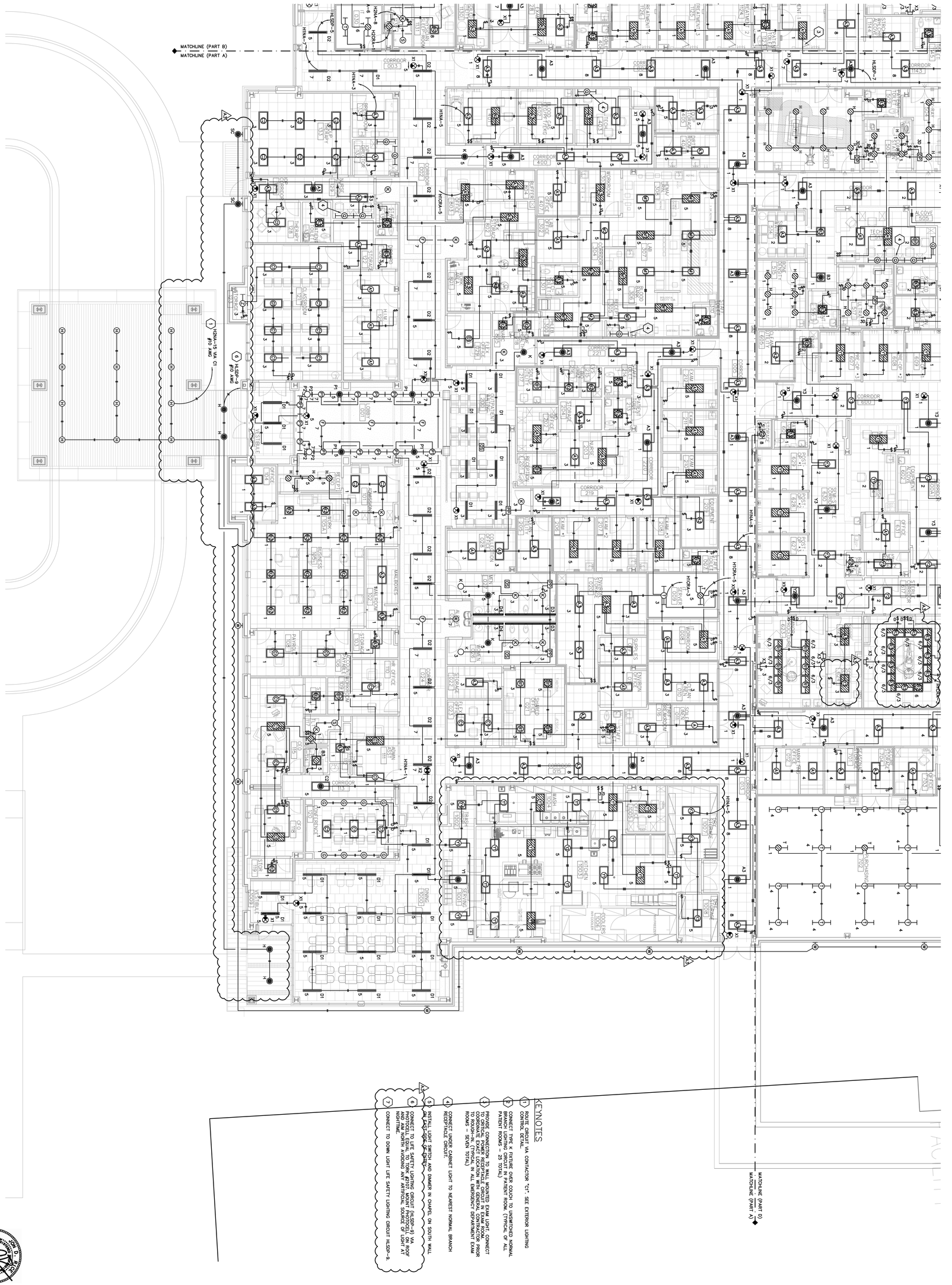
REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

1/8" =1'-0" GRAPHIC SCALE | 1/4" =1'-0" GRAPHIC SCALE | 1/2" =1'-0" GRAPHIC SCALE | 3/4" =1'-0" GRAPHIC SCALE | 1" =1'-0" GRAPHIC SCALE | 1 1/2" =1'-0" GRAPHIC SCALE | 3" =1'-0" GRAPHIC SCALE



1 PARTIAL FLOOR PLAN – LIGHTING PART A
E201A SCALE: 1/8"=1'-0"

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- PARTIAL FLOOR PLAN - LIGHTING PART "A"

Sheet Number : E201A

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: MLL
Checked: JDR

Revisions:
A1 ADDENDUM #1 DECEMBER 18, 2019
A3 ADDENDUM #3 JANUARY 8, 2020

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1/16" =1'-0" GRAPHIC SCALE
1/4" =1'-0" GRAPHIC SCALE
1/2" =1'-0" GRAPHIC SCALE
3/4" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
1 1/2" =1'-0" GRAPHIC SCALE
3" =1'-0" GRAPHIC SCALE

1 PARTIAL FLOOR PLAN — LIGHTING PART B
E201B SCALE: 1/8"=1'-0"

SEE LARGE SCALE PATIENT ROOM LIGHTING CONTROL LAYOUT SHEET, AND PATIENT ROOM LIGHTING CONTROL WIRING DETAIL/SHEET E602. (TYPICAL FOR ALL PATIENT ROOMS)

2 (TYPICAL)

H2NA-13 VIA C1 #10 AWG

MATCHLINE (PART B)
MATCHLINE (PART A)

MATCHLINE (PART A)
MATCHLINE (PART B)

277V CRITICAL CKT.
277V NORMAL CKT.

2 PATIENT ROOM LIGHTING CONTROL LAYOUT
E201B SCALE: 1/4"=1'-0"

LARGE SCALE

KEYNOTES

1. ROUTE CIRCUIT VIA CONTACTOR "C1". SEE EXTERIOR LIGHTING CONTROL DETAIL.
2. CONNECT TYPE K FIXTURE OVER COUCH TO UNSWITCHED NORMAL BRANCH CIRCUIT IN EACH PATIENT ROOM. (TYPICAL OF ALL PATIENT ROOMS – 25 TOTAL)
3. PROVIDE CONNECTION TO WALL MOUNTED EXAM LIGHT. CONNECT TO CRITICAL POWER RECEPTACLE CIRCUIT IN EXAM ROOM. COORDINATE EXACT LOCATION WITH GENERAL CONTRACTOR TO ROUGH-IN. (TYPICAL IN ALL EMERGENCY DEPARTMENT EXAM ROOMS – SEVEN TOTAL)
4. CONNECT UNDER CABINET LIGHT TO NEAREST NORMAL BRANCH RECEPTACLE CIRCUIT.
5. INSTALL LIGHT SWITCH AND DIMMER IN CHAPEL ON SOUTH WALL AT 43" AFF. (TYP.)
6. CONNECT TO LIFE SAFETY LIGHTING CIRCUIT H-SSP-9 VIA PROTOCELL EQUAL TO TORK #2107. MOUNT PROTOCELL ON NORTH AVIONING ANY ARTIFICIAL SOURCE OF LIGHT AT NIGHT TIME NORTH AVIONING.
7. CONNECT TO DOWN LIGHT LIFE SAFETY LIGHTING CIRCUIT H-SSP-9.

- PARTIAL FLOOR PLAN - LIGHTING (PART B)

Sheet Number : E201B

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Project No: 18015
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Revisions:
A1 ADDENDUM #1 DECEMBER 18, 2019
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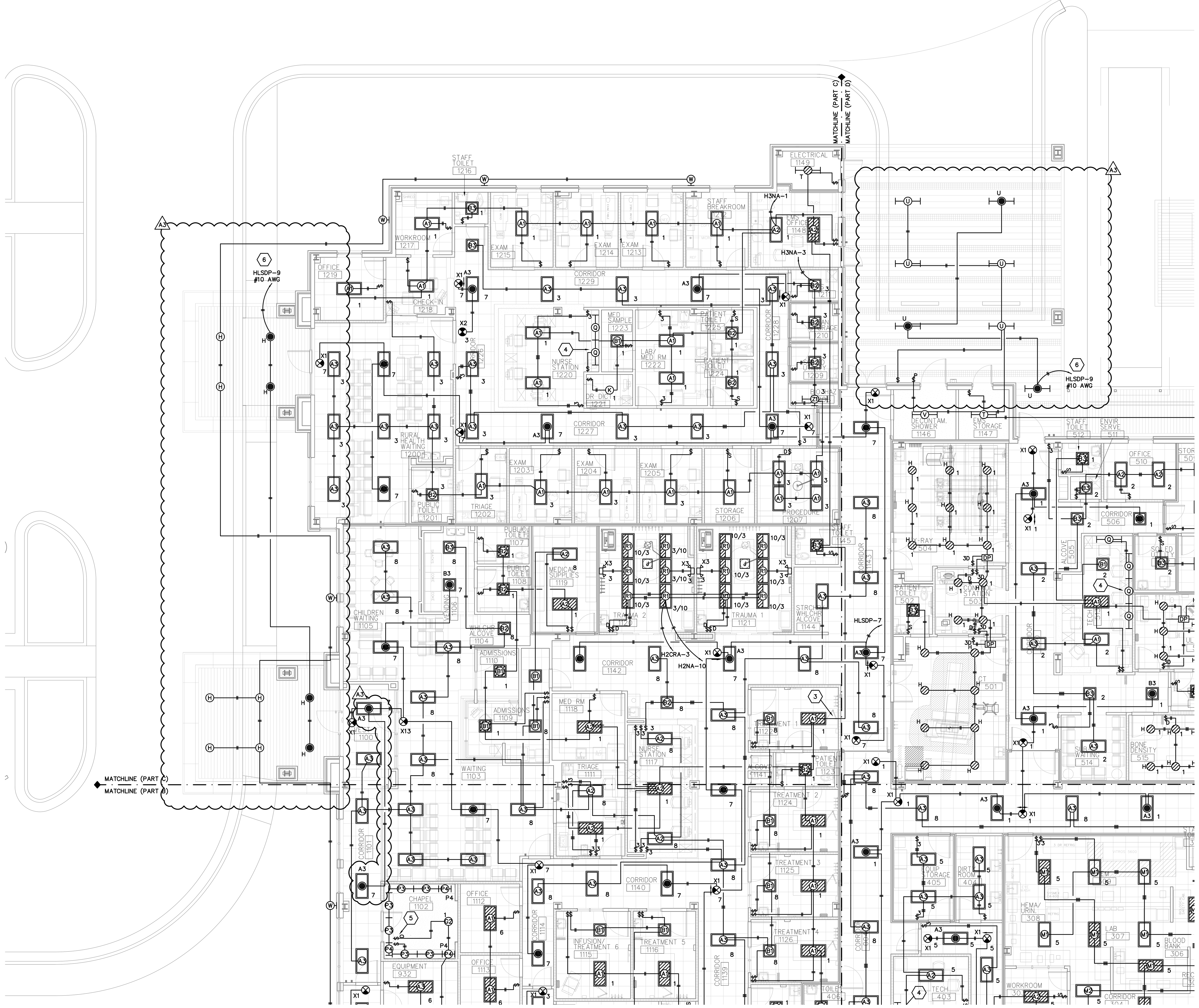


1 PARTIAL FLOOR PLAN – LIGHTING PART C
E201C SCALE: 1/8"=1'-0"

KEYNOTES

1. ROUTE CIRCUIT VIA CONTACTOR "C1". SEE EXTERIOR LIGHTING CONTROL DETAIL.
2. CONNECT TYPE K FIXTURE OVER COUCH TO UNSWITCHED NORMAL BRANCH LIGHTING CIRCUIT IN PATIENT ROOM. (TYPICAL OF ALL PATIENT ROOMS – 25 TOTAL)
3. PROVIDE CONNECTION TO WALL MOUNTED EXAM LIGHT. CONNECT TO CRITICAL POWER RECEPTACLE CIRCUIT IN EXAM ROOM. COORDINATE EXACT LOCATION WITH GENERAL CONTRACTOR PRIOR TO ROUGH-IN. (TYPICAL IN ALL EMERGENCY DEPARTMENT EXAM ROOMS – SEVEN TOTAL)
4. CONNECT UNDER CABINET LIGHT TO NEAREST NORMAL BRANCH RECEPTACLE CIRCUIT.
5. ~~INSTALL LIGHT SWITCH AND DIMMER IN CHAPEL ON SOUTH WALL ON EAST SIDE OF ENTRY.~~
6. CONNECT TO LIFE SAFETY LIGHTING CIRCUIT (HLSDP-9) VIA PHOTOCELL EQUAL TO TORK #2107. MOUNT PHOTOCELL ON ROOF AND AIM NORTH AVOIDING ANY ARTIFICIAL SOURCE OF LIGHT AT NIGHTTIME.
7. CONNECT TO DOWN LIGHT LIFE SAFETY LIGHTING CIRCUIT HLSDP-9.

3/4" =1'-0" GRAPHIC SCALE
1 1/2" =1'-0" GRAPHIC SCALE
1" =1'-0" GRAPHIC SCALE
3/4" =1'-0" GRAPHIC SCALE
1/2" =1'-0" GRAPHIC SCALE
1/4" =1'-0" GRAPHIC SCALE
1/8" =1'-0" GRAPHIC SCALE

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

Dean and Dean/Associates
architects
a professional association
DEAN • GEDDIE • GRANT • OUBRE
P.O. Box 4685 Jackson, MS 39296 4400 Old Canton Rd. Suite 200 Highland Bluff Jackson, MS39211 (601) 939-7717
www.deandean.com

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: MLL
Checked: JDR

Revisions:
A1 ADDENDUM #1 DECEMBER 18, 2019
A3 ADDENDUM #3 JANUARY 8, 2020

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

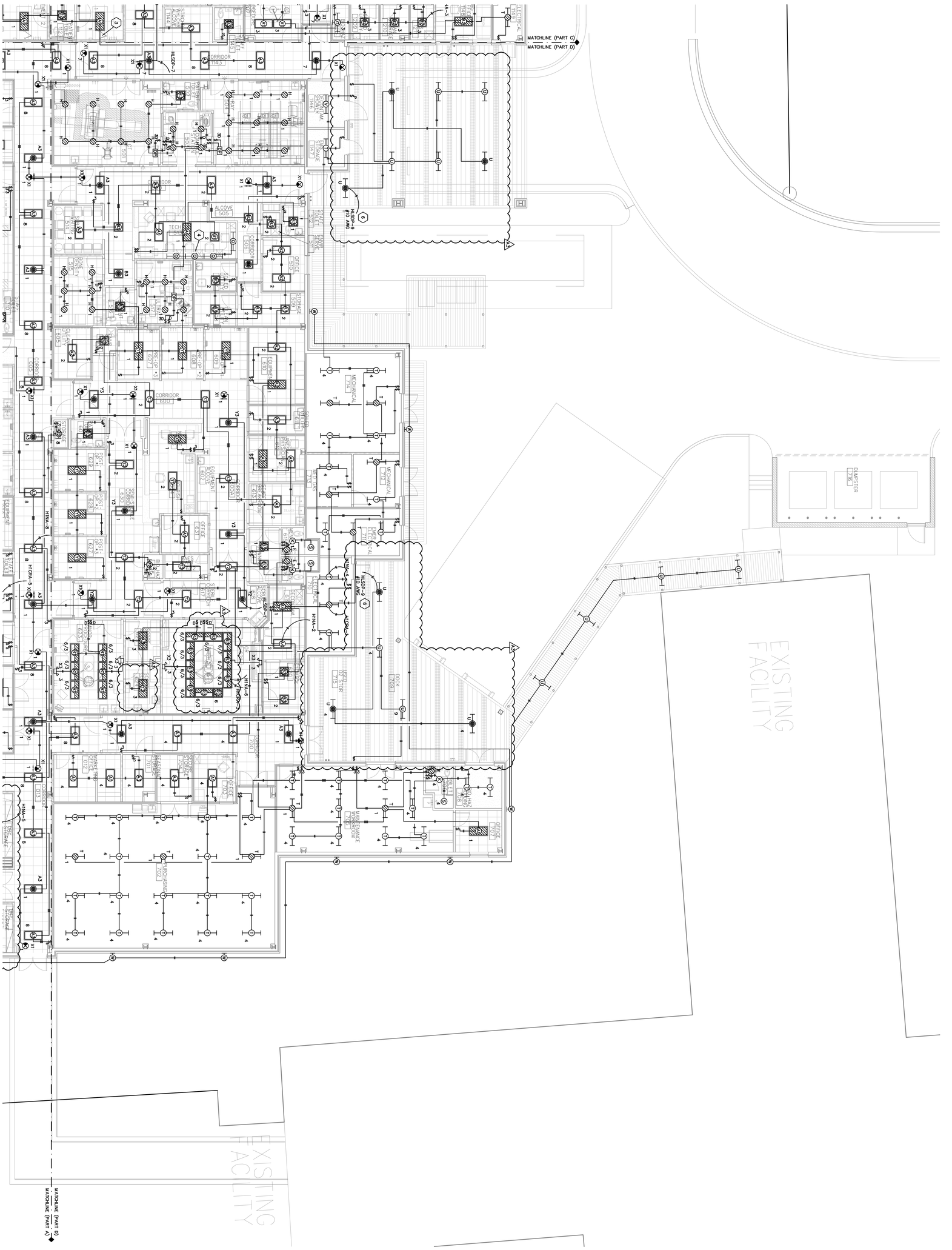
Jon D. Rice & Associates, LLC
Electrical Engineering Consultants
5403 Castlewoods Court, Suite G, Flowood, MS, 39232
Tel 601-919-8040 Fax 601-919-8060 PROJ.# 19017.00

JON D. RICE REGISTERED PROFESSIONAL ENGINEER 14455 STATE OF MISSISSIPPI

Sheet Number: E201C
– PARTIAL FLOOR PLAN – LIGHTING PART C

REPLACEMENT FACILITY FOR
TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI
PN 18015

1/16" =1'-0" GRAPHIC SCALE | 1/8" =1'-0" GRAPHIC SCALE | 1/4" =1'-0" GRAPHIC SCALE | 1/2" =1'-0" GRAPHIC SCALE | 3/4" =1'-0" GRAPHIC SCALE | 1" =1'-0" GRAPHIC SCALE | 1 1/2" =1'-0" GRAPHIC SCALE | 3" =1'-0" GRAPHIC SCALE



1 PARTIAL FLOOR PLAN – LIGHTING PART D
E201D SCALE: 1/8"=1'-0"

Jon D. Rice & Associates, LLC
Electrical Engineering Consultants
5483 Castlewoods Court, Suite G Flowood, MS. 39232
Tel 601-919-6040 Fax 601-919-6068 PROJ.# 19017.00

- PARTIAL FLOOR PLAN - LIGHTING PART D

Sheet Number : E201D

REPLACEMENT FACILITY FOR TIPPAH COUNTY HOSPITAL
RIPLEY, MISSISSIPPI

Project No: 18015
Date: 4 DECEMBER 2019
Drawn: MLL
Checked: JDR

Revisions:
1 ADDENDUM #1 DECEMBER 18, 2019
3 ADDENDUM #3 JANUARY 8, 2020

Dean and Dean/Associates architects a professional association
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www.deandean.com

EXTRUDED ALUM. GRAVEL GUARD

IN-SWING TOP SASH

DRAPERY TRACK

WINDOW 6'-4" 5'-0"

CAULK

WALL-FLOOR FINISH & BASE AS SCHEDULED

EXTRUDED ALUM. SUB SILL

COLUMN

BRICK

C.M.U.

BACK. PARGE

WATERPROOFING NO. 3

TOP OF EXCAVATED EARTH ELEV. 488'-9"

FINISH GRADE VARIES

10'-0" 10'-6" 4'-5½" 5"

NOTE:
THIS SECTION SUPERCEDES THE SECTION OF THE SAME NUMBERED SHEET NUMBER A-3 DRAWINGS DATED JAN. 1975 ONLY TO THE EXTENT SHOWN

SECTION (1912 A-9 | A-13)
SCALE: ¾" = 1'-0"

FLEMISH BOND BRICK 3 SIDES W/ DARKENED AREAS OMITTED

6'-0" BOX CULVERT UNDER ALT. #5 SEE DETAILS

TOP OF SLAB 489'-0" - VERIFY WITH MECH.

EXISTING CONC. FLOORED DITCH

FOUND. & FTG. SEE STRUCT.

CONC. FOUND. & FOOTING - SEE STRUCTURAL

SECTION "C-C"
SCALE: ⅜" = 1'-0"

3" "STANLEY" STRAP HINGES @ EACH DOOR LEAF #3926 W/ 5" x 10 FLAT HEAD STOVE BOLTS (GALV.) @ MASLY 1¼" x 10 @ DOORS. FURNISH SC911K HASP & STAPLE AND GALV. BOTTOM BOLT AND SLEEVE

DETAIL "E-E" (4 | A-13 M)
SCALE: 3" = 1'-0"

DETAIL "E-E"

"C" "D"

CONDENSING UNIT BY MECHANICAL - VERIFY SIZE W/ MECHANICAL CONTR.

8"x8" BRICK PIERS @ CORNERS & CENTER POINTS AS INDICATED

6'-8" 13'-4" 6'-8"

7'-4" 7'-4" 14'-8"

PLAN @ CONDENSING UNIT SCREEN (1 | A-1 | A-3)
SCALE: ⅜" = 1'-0"

89'-7½" ±

7⅝"

REBAR AS 1260 D

CAST STONE CAP

DOWELS @ 4'-0" O/C

WATERPROOFING NO. 3

3¾"

8'-0"

CAST STONE CAP DETAIL "F-E"
SCALE: 3" = 1'-0"

EXISTING BLDG

FLOW LINE ELEV. 488'-3"

UNEXCAVATED

FLOW LINE ELEV. 488'-6"

4" PERFORATED DRAIN TILE

TOP OF FOUNDATION WALL ELEV. 490'-4"

FLOW LINE ELEV. 488'-0"

FLOW LINE ELEV. 488'-3"

8"x16" CAST ALUM. FOUND. VENT - SEE ELEVATIONS

LOUVER FOR MECHANICAL

4" PERFORATED DRAIN TILE

8"x16" CAST ALUMINUM FOUNDATION VENTS - SEE ELEVATIONS

MECHANICAL EQUIPMENT FLOOR ELEV. 489'-0"

FLOW LINE ELEV. 487'-9"

1'x6" IZEDWOOD VERTICALS W/ 1" SPACE BETWEEN - USE GALV. NAILS TO ATTACH TO FRAME

2"x4" IZEDWOOD FRAME AND DIAGONALS

FLEMISH BOND BRICK 3 SIDES W/ DARKENED AREAS OMITTED

LINE OF CONDENSING UNIT

6'-0"

COMPACTED FILL

CARDBOARD FORMS

CONC. FOUND. & FOOTING - SEE STRUCTURAL

1'-0" TYP.

SECTION "D-D"
SCALE: ⅜" = 1'-0"

EXISTING BUILDING
(PROJECT NO. MISS 2A)

EXISTING "A" LABEL DOORS

FLOOR ELEV = 488'-4½"

RAMP IN

EXISTING

CONNECT TO "Y" @ 10" STORM SEWER - SEE MECH. & VERIFY ELEV.

FLOW LINE ELEV. 487'-9"

SEE AMENDMENT #3 (1 | A-3A)

4" PERFORATED DRAIN TILE

FLOW LINE ELEV. 488'-0"

CONNECT TO "Y" @ 10" STORM SEWER - SEE MECH. & VERIFY ELEV.

Temporary Wood Ramp & Platform Constructed of ¾" Exterior grade Plywood & Treated Wood Frame

Ramp Up 8'-0"

NEW ACOUST. TILE CEIL. TO THIS POINT

REMOVE WINDOW & CLOSE OPNG. FINISH NEW SURFACES TO MATCH EXISTING. REPAINT ROOM

EXISTING NURSING HOME

RECREATION ROOM

FLOOR ELEV = 488'-0"

10'-0"±

CRAWL SPACE
EXCAVATE TO ELEV. 488'-0"

39'-4" 15'-0" 13'-2"

15'-6" 6'-6" 8'-6"

11'-9"

8'-0" HIGH BRICK WITH CAST STONE CAP

ELEV. 488'-0"

FLOW LINE ELEV. 487'-0"

CONNECT TO 12" Ø STORM SEWER - SEE MECH. & VERIFY ELEV.

SPACES COINCIDE W/ WINDOW OPENINGS ABOVE - BRICK MASONRY TO HAVE STACKED VERTICAL JOINTS @ EACH SIDE

13'-3½"± 11'-0" 11'-0" 11'-0" 11'-0" 11'-0" 11'-0" 11'-0" 11'-0" 11'-0" 11'-0" 11'-0" 10'-3" 11'-5"

155'-11½"

A B C D E F G H J K L M N O P

1 2 3 4 5 6 7 8 9

N

PART GROUND FLOOR PLAN
SCALE ⅛" = 1'-0"
BASE BID

KEY PLAN

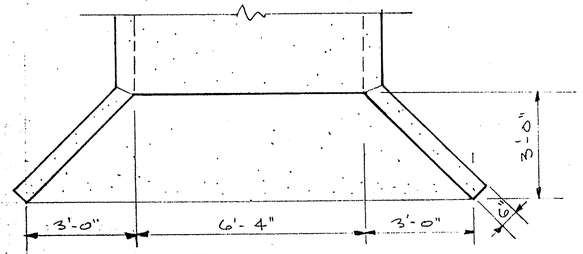
MALVANEY ASSOCIATES - ARCHITECTS - PLANNERS
JACKSON AND TUPELO

PROJECT NO. MISS 2C ADDITIONS TO TIPPAH COUNTY HOSPITAL RIPLEY - MISSISSIPPI

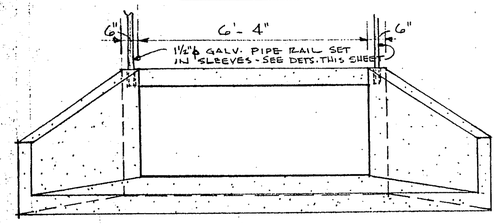
DRAWN BY J.C.
DATE 19 FEB. 75

SHEET NO. A-3R OF 10 SHEETS

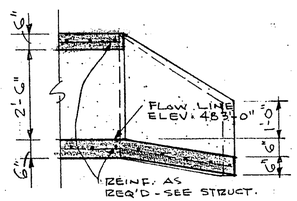
REGISTERED ARCHITECT STATE OF MISSISSIPPI 3112



PLAN

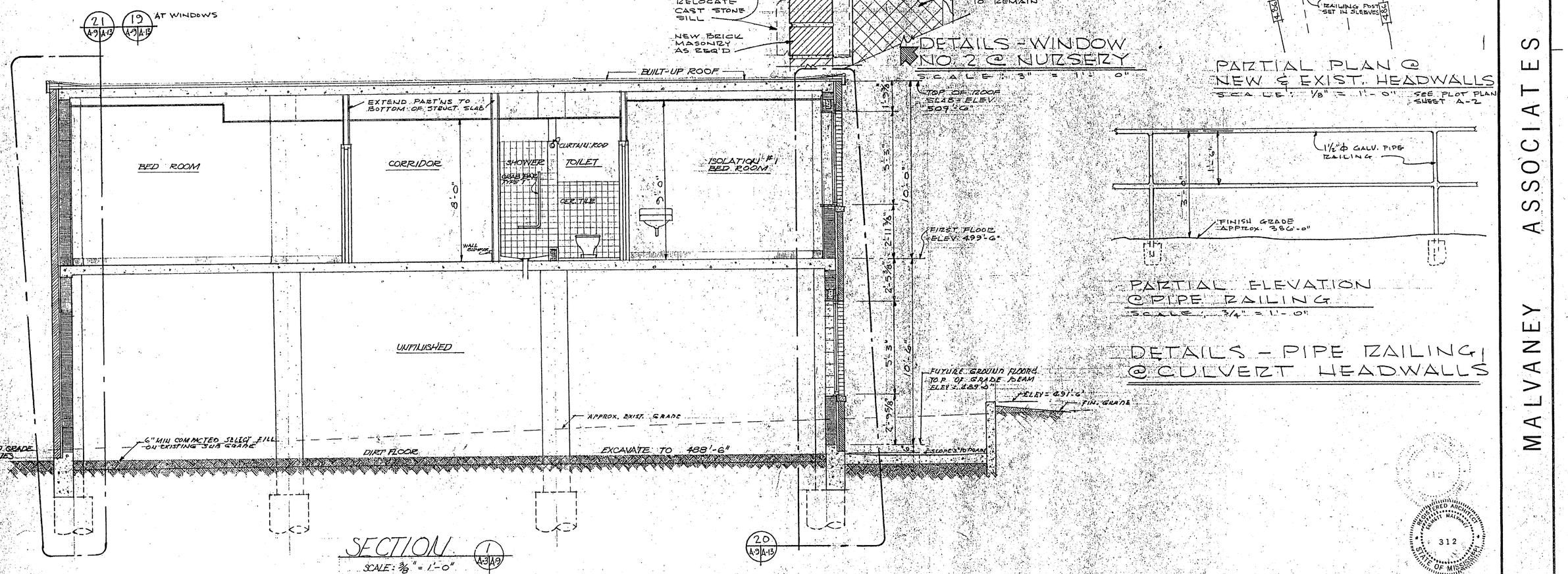


ELEVATION



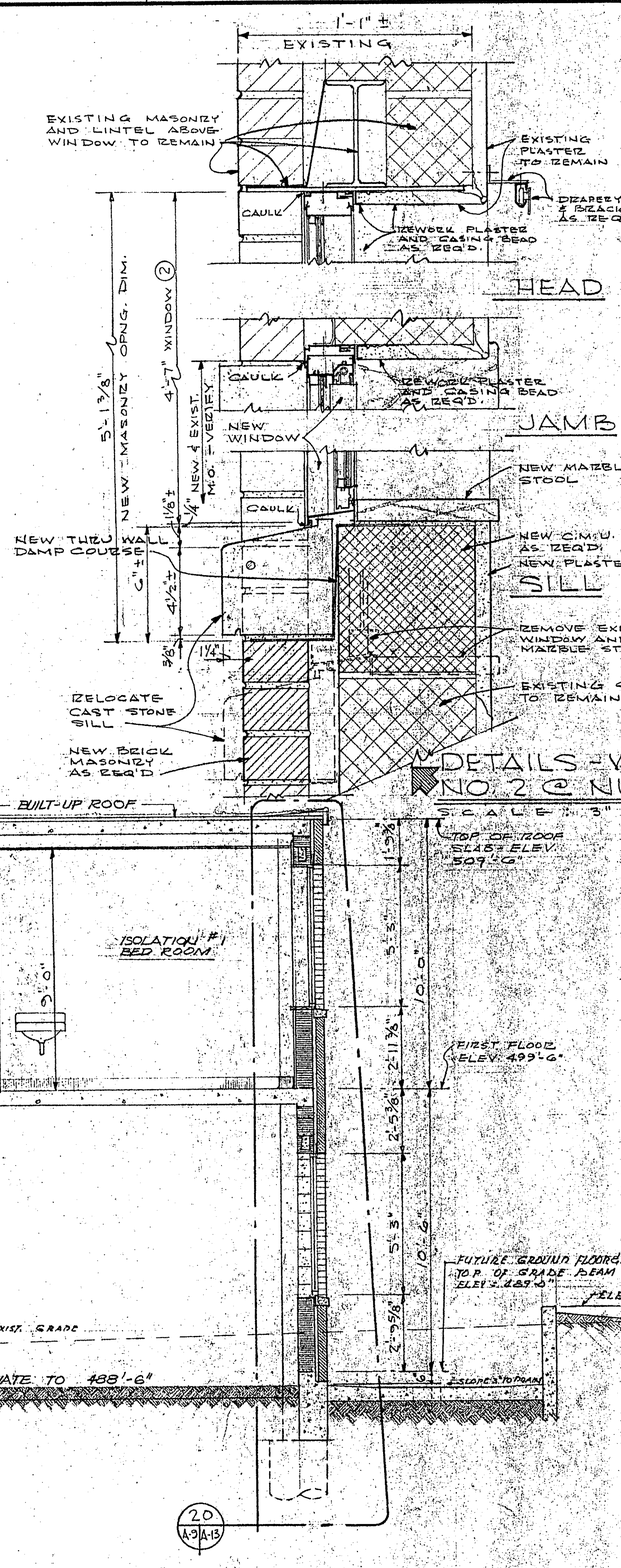
BOX CULVERT HEADWALL DETAILS

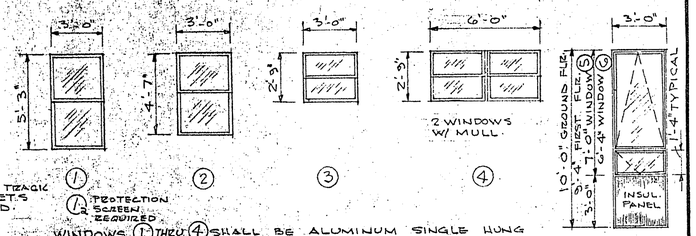
SCALE: ½" = 1'-0"



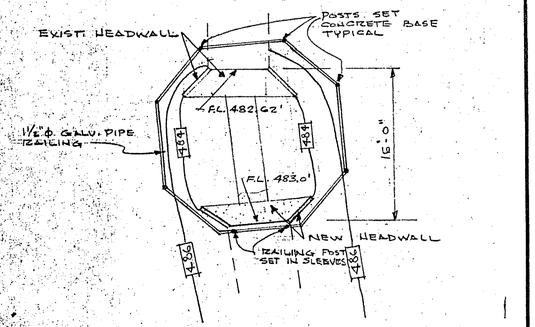
SECTION 1 A-3 A-9

SCALE: ⅜" = 1'-0"





WINDOW SCHEDULE



PARTIAL PLAN @ NEW & EXIST. HEADWALLS

SCALE: ⅛" = 1'-0" SEE PLOT PLAN SHEET A-2

PARTIAL ELEVATION @ PIPE RAILING

SCALE: ¾" = 1'-0"

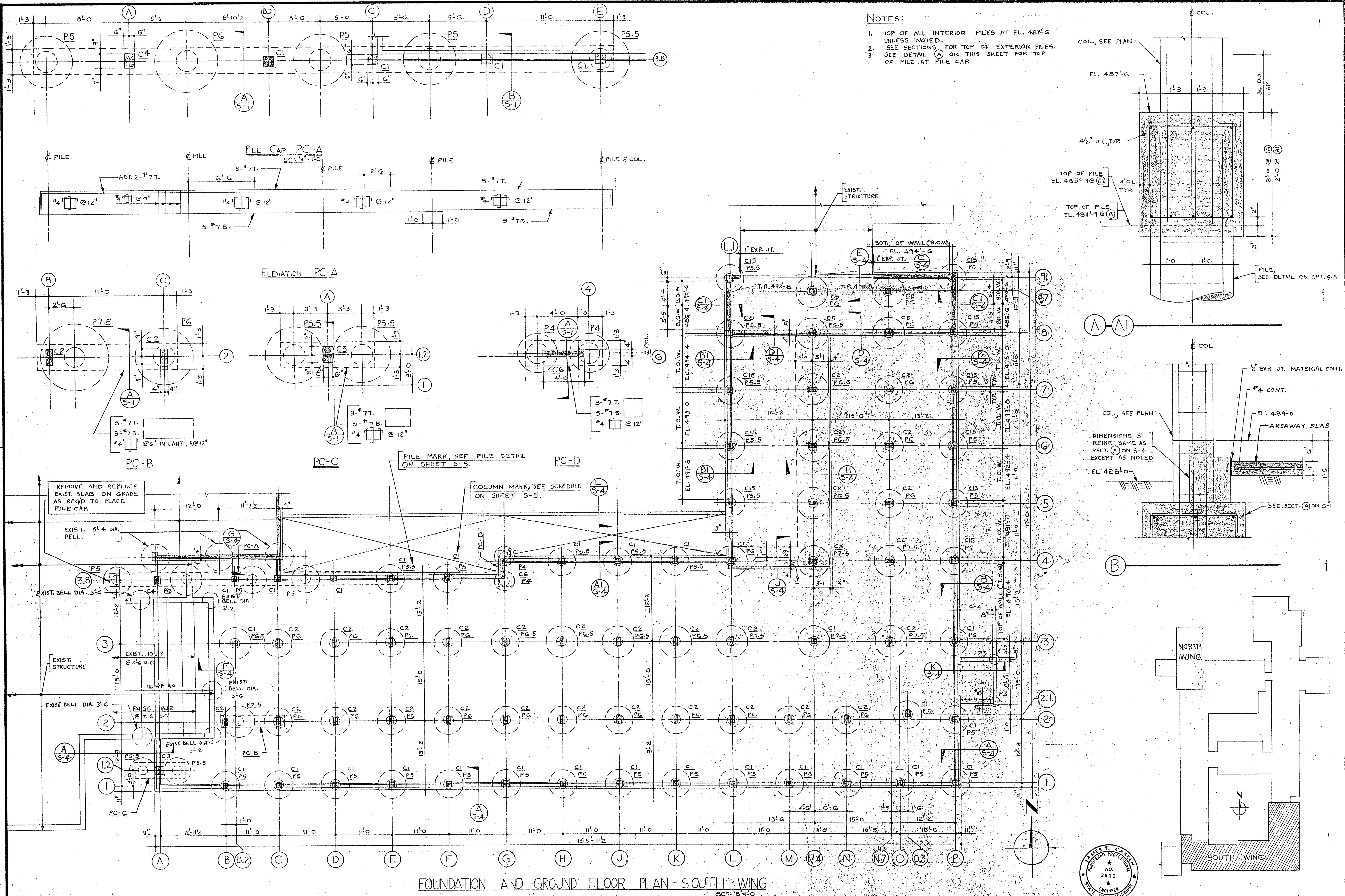
DETAILS - PIPE RAILING @ CULVERT HEADWALLS

MALVANEY ASSOCIATES - ARCHITECTS - PLANNERS
JACKSON AND TUPELO

REGISTERED ARCHITECT ROBERT MALVANEY 312 STATE OF MISSISSIPPI

PROJECT NO. MISS 2C ADDITIONS TO TIPPAH COUNTY HOSPITAL TIPLEY - MISSISSIPPI

DRAWN BY JH DATE JAN 1978 SHEET NO. A-9 OF SHEETS

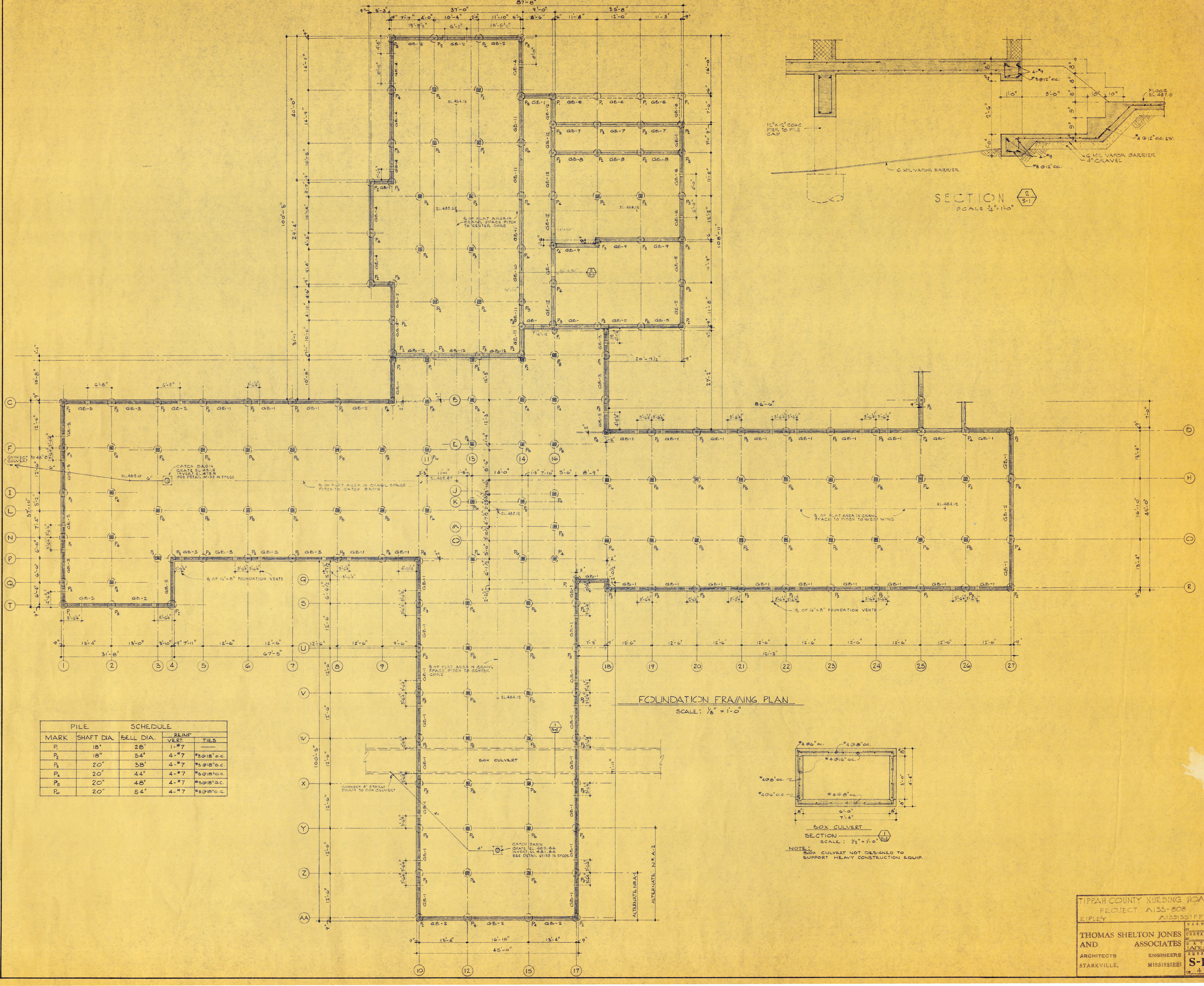


MALVANEY ASSOCIATES ARCHITECTS - PLANNERS
JACKSON AND TUPELO

PROJECT NO. MISS 2C ADDITIONS TO - TIPPAH COUNTY HOSPITAL RIPLEY - MISSISSIPPI

DRAWN BY HNP
DATE JAN. 1975

SHEET NO. S-1 OF 7 SHEETS



FOUNDATION FRAMING PLAN

SCALE: 1/8" = 1'-0"

PILE	SCHEDULE			
MARK	SHAFT DIA.	BELL DIA.	REINF VERT.	REINF TIES
P_1	18"	28"	1-#7	——
P_2	18"	34"	4-#7	#3@18" o.c.
P_3	20"	38"	4-#7	#3@18" o.c.
P_4	20"	44"	4-#7	#3@18" o.c.
P_5	20"	48"	4-#7	#3@18" o.c.
P_6	20"	54"	4-#7	#3@18" o.c.

SECTION 2/S-1
SCALE 3/4" = 1'-0"

BOX CULVERT
SECTION 1/S-1
SCALE: 1/2" = 1'-0"

NOTE:
BOX CULVERT NOT DESIGNED TO SUPPORT HEAVY CONSTRUCTION EQUIP.

TIPPAH COUNTY NURSING HOME PROJECT MISS-808 RIPLEY MISSISSIPPI	
THOMAS SHELTON JONES AND ASSOCIATES ARCHITECTS ENGINEERS STARKVILLE, MISSISSIPPI	DRAWN BY CHECKED BY DATE 1 APR. 67 SHEET S-1 OF 4

4" SLAB ON GRADE REINF. WITH 6x6-6/6 WELDED WIRE MESH

4" SLAB REINF. WITH 6x6-6/6 WELDED WIRE MESH OVER 4" WASHED GRAVEL

NOTE:
4" SLAB REINF. WITH 6x6-6/6 WELDED WIRE MESH OVER 4" WASHED GRAVEL

SLABS ON GRADE SEE NOTE ABOVE

4" SLAB ON GRADE REINF. WITH 10x10-10/10 WELDED WIRE MESH

2" HOLD DOWN IN ALL AREAS THAT HAVE CERAMIC TILE OR QUARRY TILE FLOORS EXCEPT THOSE AS NOTED

2" HOLD DOWN

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

FIRST FLOOR FRAMING PLAN

SCALE 1/8" = 1'-0"

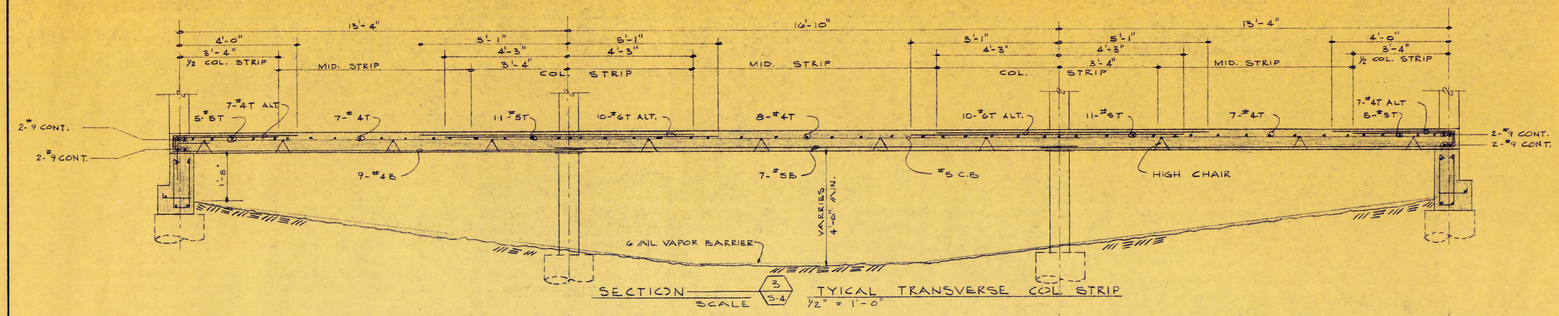
CONC. REINF. PLACEMENT OF FLOOR CENTER SECTION

SCALE 1/8"=1'-0"

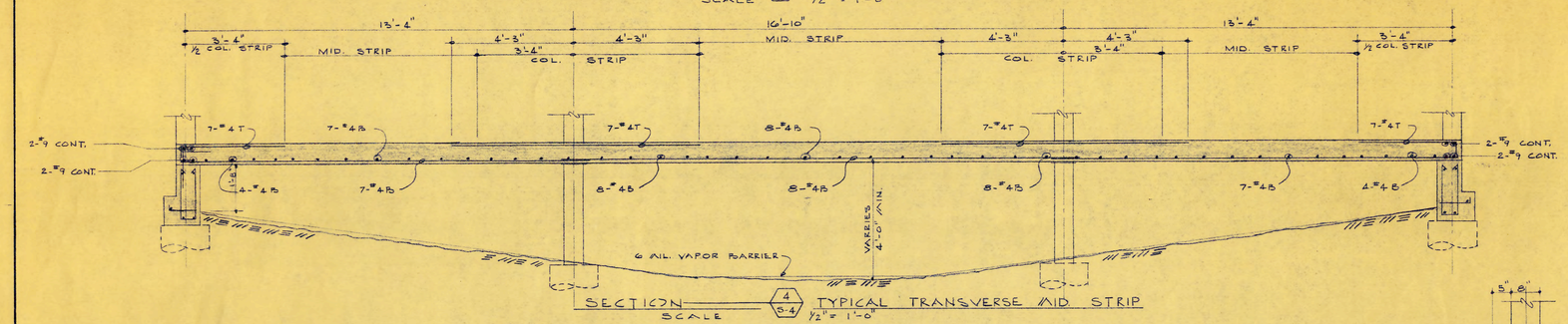
TIPPAH COUNTY NURSING HOME
PROJECT MISS-508
RIPLEY MISSISSIPPI

THOMAS SHELTON JONES AND ASSOCIATES
ARCHITECTS ENGINEERS
STARKVILLE MISSISSIPPI

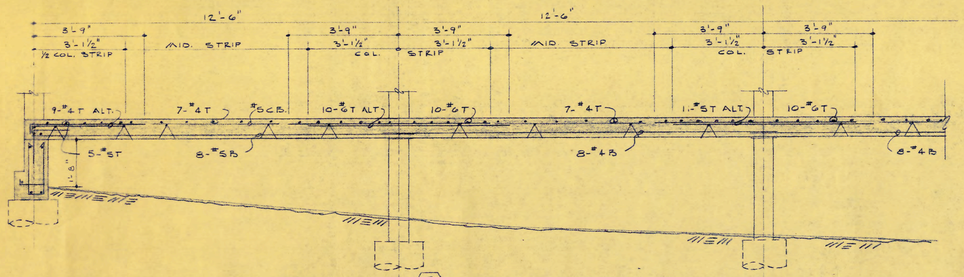
DRAWN
CHECKED
DATE 1 APRIL 67
SHEET S-2
OF 4



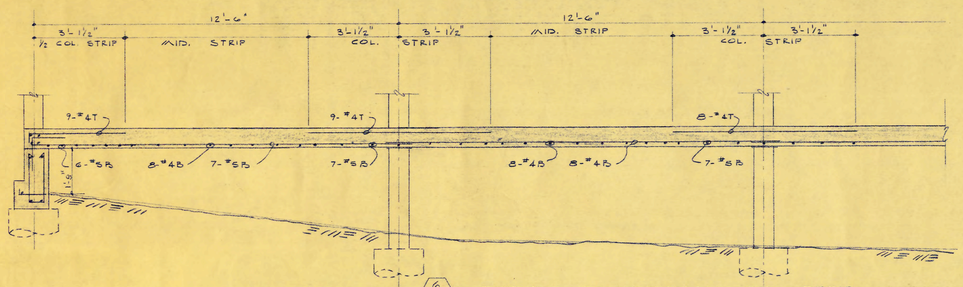
SECTION — SCALE — 3 / S-4 — TYPICAL TRANSVERSE COL. STRIP
½" = 1'-0"



SECTION — SCALE — 4 / S-4 — TYPICAL TRANSVERSE MID. STRIP
½" = 1'-0"



SECTION — SCALE — 5 / S-4 — TYPICAL LONGITUDINAL COL. STRIP
½" = 1'-0"



SECTION — SCALE — 6 / S-4 — TYPICAL LONGITUDINAL MID. STRIP
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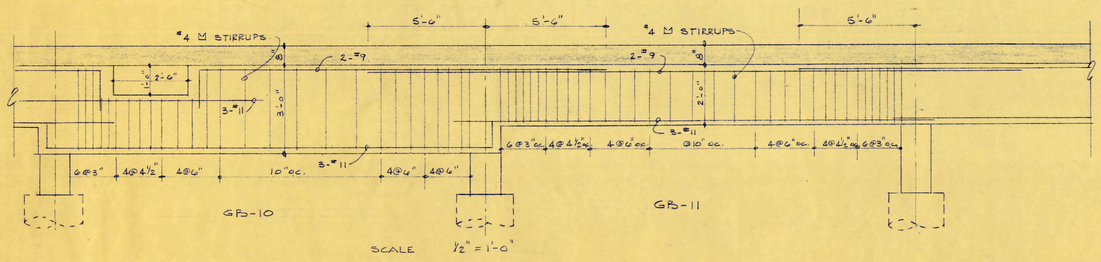
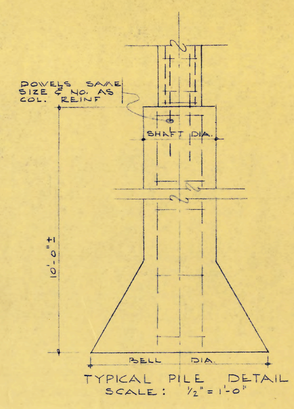
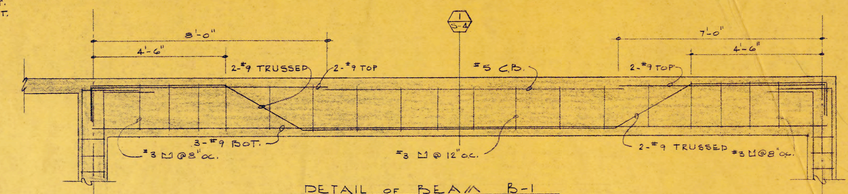


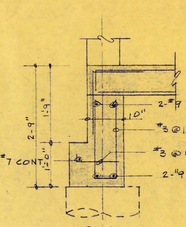
SCALE ½" = 1'-0"



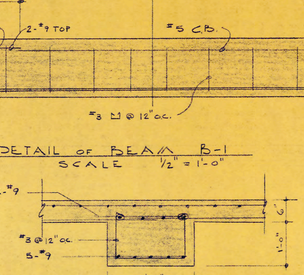
TYPICAL PILE DETAIL
SCALE: ½" = 1'-0"



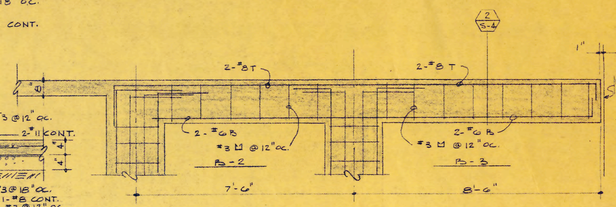
DETAIL OF BEAM B-1
SCALE ½" = 1'-0"



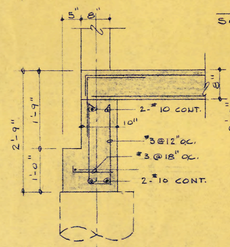
GB-1
SCALE ¾" = 1'-0"



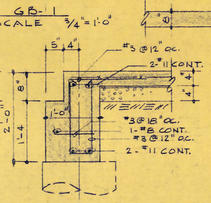
SECTION — SCALE — 1 / S-4
¾" = 1'-0"



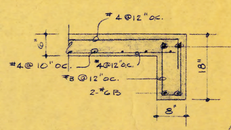
DETAIL OF BEAMS B-2 & B-3
SCALE ½" = 1'-0"



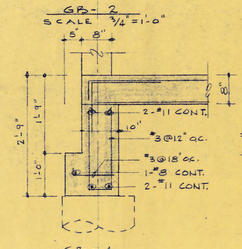
GB-2
SCALE ¾" = 1'-0"



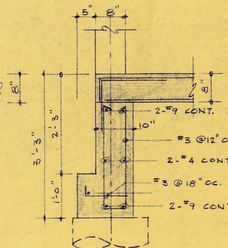
GB-5
SCALE ¾" = 1'-0"



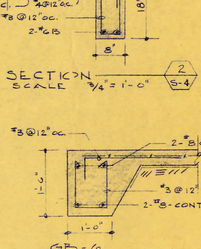
SECTION — SCALE — 2 / S-4
¾" = 1'-0"



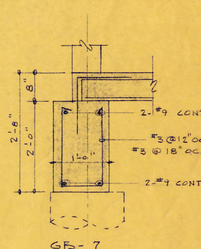
GB-4
SCALE ¾" = 1'-0"



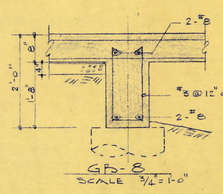
GB-3
SCALE ¾" = 1'-0"



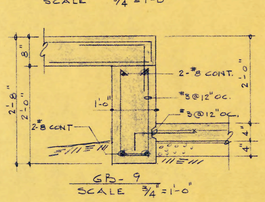
GB-6
SCALE ¾" = 1'-0"



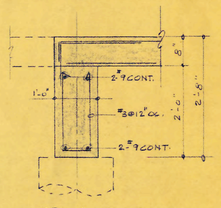
GB-7
SCALE ¾" = 1'-0"



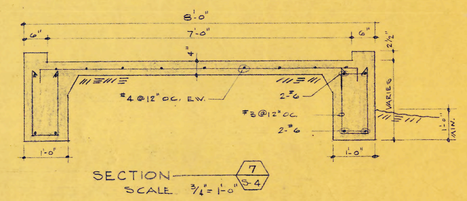
GB-8
SCALE ¾" = 1'-0"



GB-9
SCALE ¾" = 1'-0"

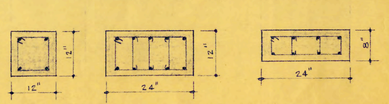


GB-12
SCALE ¾" = 1'-0"



SECTION — SCALE — 7 / S-4
¾" = 1'-0"

COLUMN SCHEDULE			
SIZE	12 x 12	8 x 24	12 x 24
VERT. REINF.	4-#6	8-#6	10-#9
TIES	#3@ 12" oc.	#3@8" oc.	#3@ 12" oc.
STORY	FLOOR	FLOOR	FLOOR
MARK	A-9,11,13,14,16 A-16; C-11,13,14,16 F-2 TO 11; E-13,14,16 D-18; H-18 TO 24 I-2; J-16; K-13,14 L-3 TO 11; M-16 N-2; O-18 TO 26 P-13,14,16; Q-17 Q-2; S-2,15 U-12,15; V-12,15 V-12,15; X-12,15 Y-12,15; Z-12,15	A-18; A,-18 B-18; C-1 TO 9 D-19 TO 27 F-1; I-1; N-1 P-3 TO 10; Q-1 R-18 TO 27; S-10,17 U-10,17; V-10,17 X-10,17; Y-10,17 Z-10,17; AA-10,12,15,17	H-25, 27



TIE DETAILS

GENERAL NOTES

1. CONC. 28 DAY COMP. STRENGTH TO BE 3,000 PSI
2. YIELD STRENGTH OF REINF. STEEL TO BE 40,000 PSI
3. STRUCTURAL STEEL TO BE A.S.T.M. A-36.
4. CARRING BARS TO BE #5 WITH HIGH CHAIRS.
5. PROVIDE CORNER BARS IN ALL BEAMS & FOUNDATION WALLS.
6. ALL REINF. STEEL TO BE PLACED IN ACCORDANCE WITH A.C.I. SPECS.
7. REINF. STEEL PLACING ORDER:

SOUTH WING
a. BOT. EAST-WEST
b. BOT. NORTH-SOUTH
c. TOP. NORTH-SOUTH
d. TOP EAST-WEST

REMAINDER OF BLDG.
a. BOT. NORTH-SOUTH
b. BOT. EAST-WEST
c. TOP EAST-WEST
d. TOP NORTH-SOUTH

8. IN ALL NON-TYPICAL AREAS, EXTEND TOP REINF. STEEL 1'-6" BEYOND COL. STRIP BOUNDS.
9. ALL PIERS TO HAVE SAME REINF. AS COL.

TIPPAH COUNTY NURSING HOME
PROJECT A155-604
RIPLEY MISSISSIPPI

THOMAS SHELTON JONES AND ASSOCIATES
ARCHITECTS ENGINEERS
STARKVILLE, MISSISSIPPI

DRAWN
CHECKED
DATE JAN. 67
SHEET S-4
OF 4