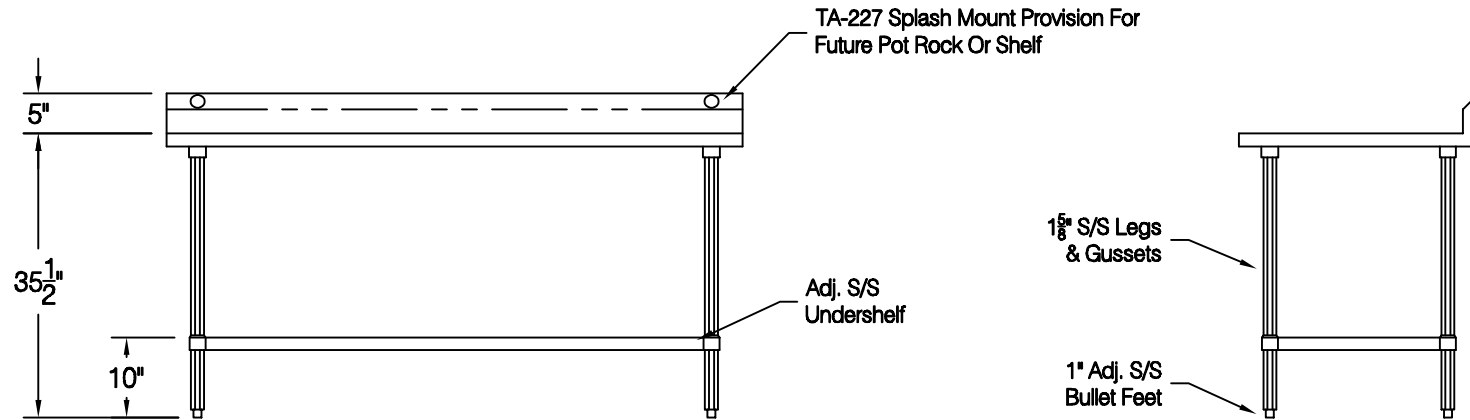
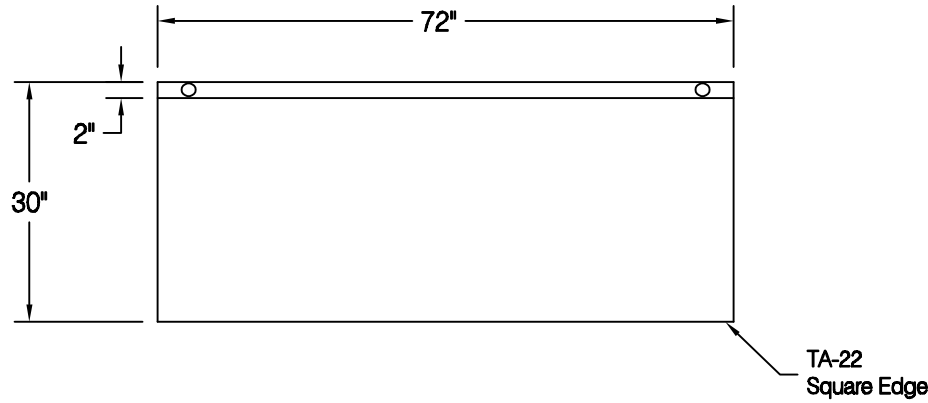


Quantity: 1



Customer:	Order / Quote #	149		Sheet #	Original Drawing Date:	NO.	Revision Date:	By:	Print Approval:		
	Job Name:	Model #	Item #	Material:		1				Accessory Locations MUST Be Verified Prior To Unit Being Fabricated	
	Purchase Order # :	Drawn By:	Scale:	Tolerance:		2					
		E. Mencarelli	1/2" = 12"	+ .500	NSF	3					Approved By _____ Date _____
	FACTORY USE ONLY:	WELDING:	Final Inspection:			4					
	1) Date: _____ Inspected By: _____ 2) Date: _____ Inspected By: _____	1) Date: _____ Inspected By: _____ 2) Date: _____ Inspected By: _____		5				Approved By _____ Date _____			