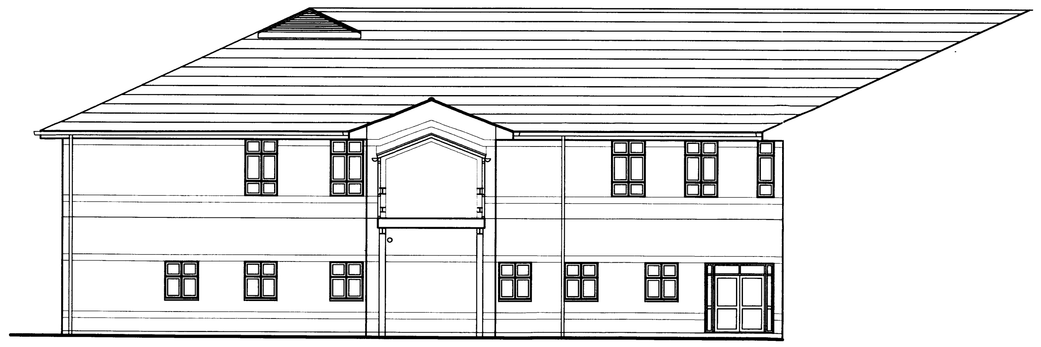
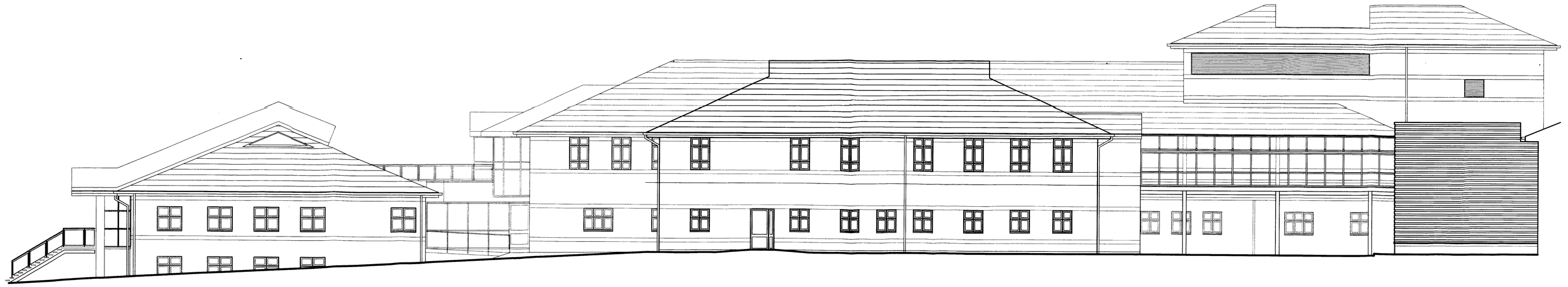


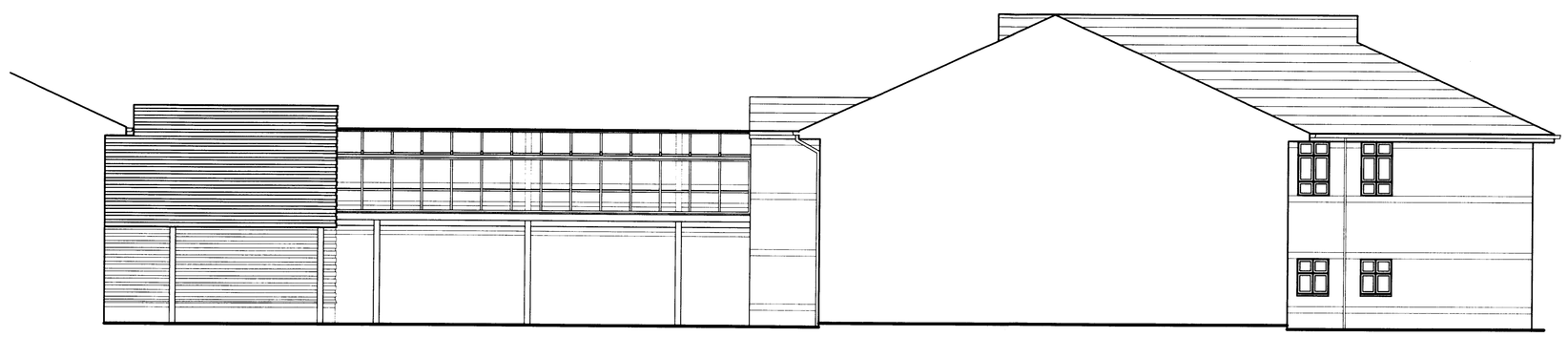
NORTH ELEVATION



SOUTH ELEVATION



WEST ELEVATION

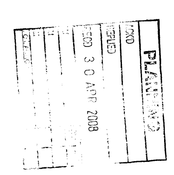


EAST ELEVATION

NOTES:
1) UNDER NO CIRCUMSTANCES SHOULD DIMENSIONS BE SCALED FROM THIS DRAWING 'IF IN DOUBT ASK'.

2) THIS DRAWING IS TO BE READ IN CONJUNCTION WITH ALL OTHER RELEVANT DRAWINGS, ANY DISCREPANCIES, ERRORS OR OMISSIONS TO BE BROUGHT TO THE ATTENTION OF LAING O'ROURKE.

3) ALL DIMENSIONS TO BE CHECKED BEFORE COMMENCEMENT OF WORK ON SITE.



Rev. By Chkd.	COMMENTS	Date Authorised
P1 SF	ISSUED FOR PLANNING APPLICATION	23/04/08 SK

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Project
WYTHENSHAWE HOSPITAL
CYSTIC FIBROSIS UNIT

Drawing
EXISTING ELEVATIONS

Purpose of issue	Status
P2/APPROVAL	PRELIMINARY

Project number	Scale	Original drg. sheet size
6742	1:100	A0

Drawing number	Rev.
WC/GD/01/0-/DR/A/20203	P1

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