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Consultants:
CONSULTANT NAME in FIT TEXT
STREET ADDRESS, CITY, STATE, ZIP
TELEPHONE #

Client
CLIENT NAME-L1
CLIENT NAME-L2
CLIENT STREET ADDRESS
CLIENT CITY, STATE, ZIP

Project Title
PROJECT NAME-L2
PROJECT NAME-L1
PROJECT STREET ADDRESS
PROJECT CITY, NY ZIP

Drawing Title
DWGTITLE-LINE#1
DWGTITLE-LINE#2
DWGTITLE-LINE#3

Phase
BID SUBMISSION

Professional Seal & Signature
Date: **##/##/20##**
DASNY Project No: **#####9999**
Consultant Project No: **#####-####**
Scale:
1/8" = 1'-0"
Drawn By:
NAME
Checked By:
NAME

LA-####.###
Drawing Number | Drawing ### of ###

FOR NEW YORK CITY PROJECTS SUBMITTING TO NYC-DEPARTMENT OF BUILDINGS, TURN ON "G-TTLB-ANNO-NYC" LAYER AND USE. FOR ALL OTHER PROJECTS, TURN OFF LAYER.

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