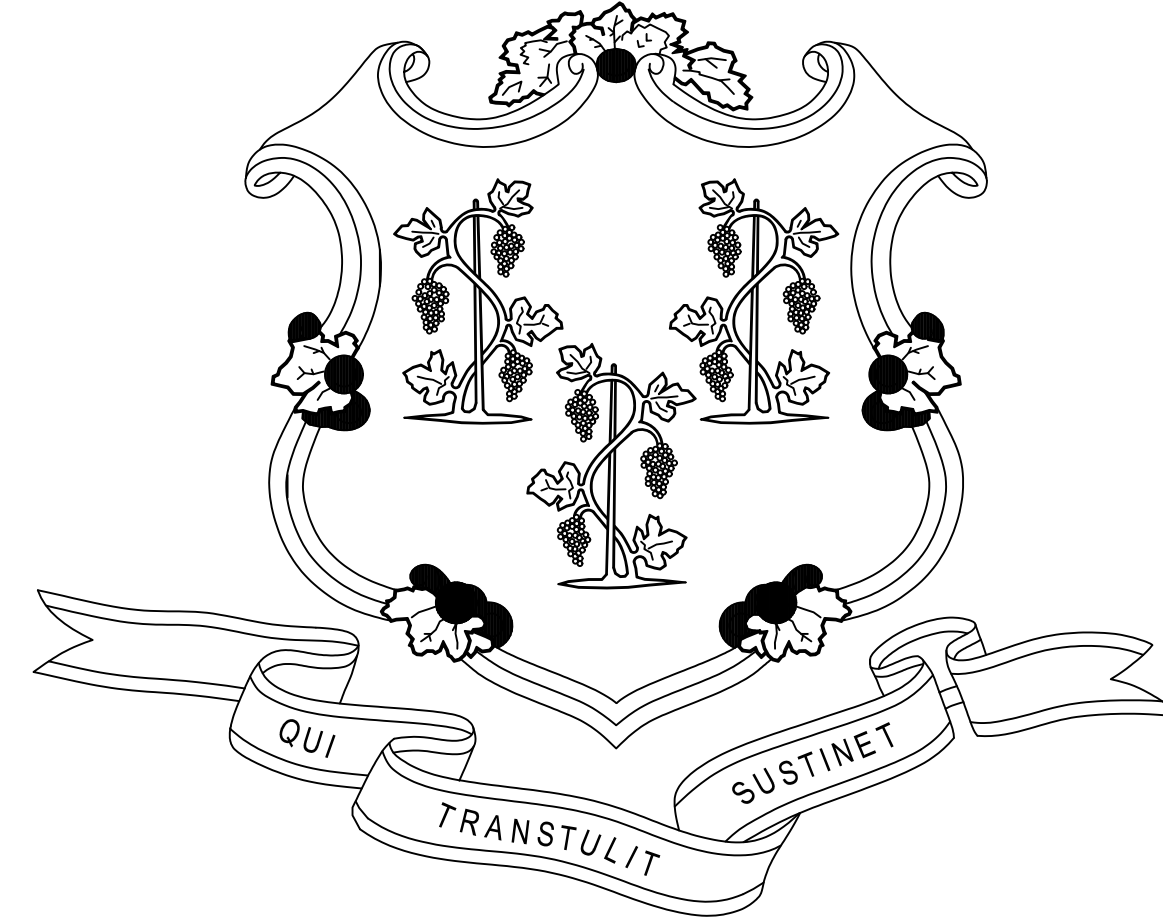


STATE OF CONNECTICUT



GOVERNOR NED LAMONT

DEPARTMENT OF ADMINISTRATIVE SERVICES
MICHELLE H. GILMAN
COMMISSIONER

DEPARTMENT OF XXXXXXXXXXXXXXXX
XXXXXXXXXXXXX
COMMISSIONER

PROJECT NAME
PROJECT LOCATION
PROJECT CITY, CONNECTICUT

PROJECT NO. BI-__-__

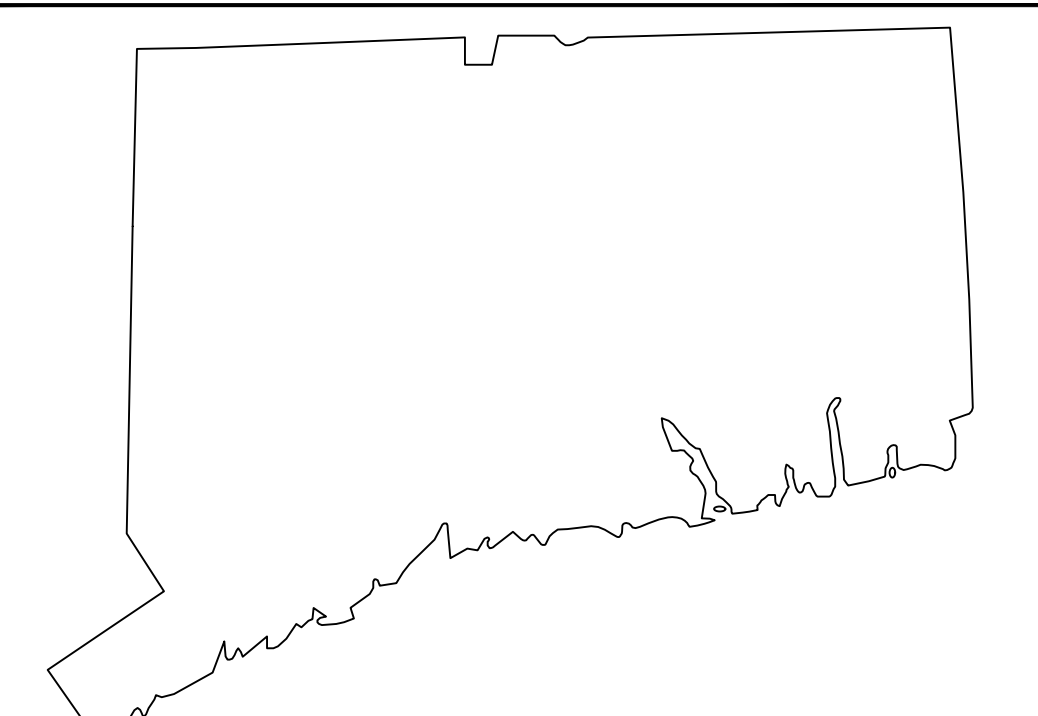
ARCHITECTS AND ENGINEERS
FIRM NAME
FIRM ADDRESS
FIRM CITY, STATE, ZIP CODE
FIRM PHONE

CONTRACT DRAWINGS

NO. TITLE
A1.01 COVER SHEET
SHEET TITLE

D.C.S BUILDING NUMBER 00000

SITE PLAN



LOCATION PLAN