

GENERAL NOTES:

- A) THIS DESIGN, AND DRAWINGS HAVE BEEN PRODUCED FOR THE SPECIFIC USE OF THIS PROJECT ONLY, AND AS SUCH SHALL REMAIN THE EXCLUSIVE PROPERTY OF SINCLAIR DENTAL, AND SHALL NOT BE USED FOR ANY OTHER PURPOSE WITHOUT THE PRIOR WRITTEN CONSENT OF SINCLAIR DENTAL.
 B) SINCLAIR DENTAL WILL NOT ASSUME ANY RESPONSIBILITY FOR DEVIATIONS FROM THE DETAIL DRAWINGS AND SPECIFICATIONS WITHOUT PRIOR WRITTEN ENDORSEMENT.
 C) THE CONTRACTOR SHALL ASSUME FULL RESPONSIBILITY FOR THE EXECUTION OF HIS/HER WORK AND FOR ANY CHANGES AND/OR DEVIATIONS FROM THE DRAWINGS OR SPECIFICATIONS MADE WITHOUT PRIOR WRITTEN APPROVAL FROM THE OWNER AND/OR THE SINCLAIR DESIGN SERVICES DEPT. THE COST OF CORRECTIONS RESULTING FROM CHANGES AND/OR DEVIATIONS MADE WITHOUT ENDORSEMENT SHALL BE BORNE BY THE CONTRACTOR.
 D) SINCLAIR DENTAL IS RESPONSIBLE FOR INSTALLATION REGARDING DENTAL EQUIPMENT ONLY. ALL OTHER INSTRUCTIONS ON THESE PLANS ARE TO BE CONSIDERED ONLY AS SUGGESTIONS AND DO NOT INVOLVE ANY RESPONSIBILITY ON THE PART OF SINCLAIR DENTAL.
 E) THE INSTRUCTIONS AND SPECIFICATIONS GIVEN BY THE MANUFACTURERS ON INSTALLATION TEMPLATES HAVE PRIORITY OVER ALL DIRECTIVES COMING FROM SINCLAIR DENTAL OR OTHERS.
- A) CONTRACTOR TO CHALK FLOOR PLAN ON SITE, VERIFY AND BE RESPONSIBLE FOR ALL DIMENSIONS, VERIFY GRADES, LINES, LEVELS AND DIMENSIONS INDICATED AND REPORT ANY ERRORS OR INCONSISTENCIES TO THE SINCLAIR DESIGN SERVICES DEPT. BEFORE COMMENCING WORK. CONFIRM JOB SITE DIMENSIONS AT ONCE TO ALLOW PROMPT CHECKING OF SHOP AND OTHER DRAWINGS.
 B) CONTRACTOR AND ALL SUB-TRAIDS SHALL BE RESPONSIBLE FOR VISITING THE SITE TO BECOME FAMILIAR WITH ALL FEATURES AND CHARACTERISTICS AFFECTING THE WORK OF THE CONTRACT. THE CLIENT WILL NOT BE RESPONSIBLE FOR ANY DIFFICULTIES ENCOUNTERED RESULTING FROM FAILURE TO DO SO.
 C) A COMPLETE SET OF DRAWINGS MUST BE KEPT AT THE JOB SITE AT ALL TIMES AND ANY CHANGES MUST BE NOTED THEREON AND INITIALED.
- DRAWINGS ARE NOT TO BE SCALED.
- ALL WORK IS TO CONFORM TO OR EXCEED THE PROVINCIAL BUILDING CODE, LATEST EDITION OF THE CANADIAN NATIONAL BUILDING CODE OF THE MUNICIPALITY, THE OCCUPATIONAL HEALTH AND SAFETY ACT AND ALL OTHER AUTHORITIES HAVING JURISDICTION.
- ITEMS LISTED OR NOTED HEREIN ARE FOR GUIDANCE ONLY AND DO NOT NECESSARILY CONSTITUTE THE ENTIRE EXTENT OF THE WORK TO BE CARRIED OUT UNDER THE CONTRACT. CONTRACTOR TO PROVIDE ALL WORK WHETHER OR NOT IT IS SPECIFICALLY SHOWN OR SPECIFIED, WHICH MAY BE NECESSARY TO COMPLETE THE WORK IN THE TRUE INTENT OF THE CONTRACT. WHERE THE DOCUMENTS DO NOT PROVIDE ALL INFORMATION NECESSARY FOR THE COMPLETE INSTALLATION OF AN ITEM, THEN THE MANUFACTURERS INSTRUCTIONS FOR FIRST QUALITY WORKMANSHIP SHALL BE STRICTLY COMPLIED WITH. ALL EQUIPMENT AND MATERIALS SHALL BE NEW COMMERCIAL GRADE AND HAVE THE APPROPRIATE CSA, ULC, AND CGA APPROVALS.
- A) THE CONTRACTOR SHALL BE RESPONSIBLE FOR ALL LICENSES AND PERMITS, INCLUDING THE APPLICATIONS AND PAYMENT OF ALL REQUIRED DOCUMENTS AND INSPECTIONS, INCLUDING FINAL INSPECTION FOR OCCUPANCY PERMIT. RETAIN ALL INSPECTION CERTIFICATES AND POST THESE PERMITS AT THE SITE.
 B) SINCLAIR DENTAL WILL NOT PROVIDE OR PAY FOR HVAC AND SPRINKLER DRAWINGS. INCLUDING ANY SPECIFICATIONS OR OTHER DRAWINGS AND SPECIFICATIONS THAT MAY BE REQUIRED FOR LICENSES AND PERMITS AND ARE THUS THE CONTRACTORS RESPONSIBILITY. ALL LICENSES AND PERMITS UNDER THE CONTRACTORS RESPONSIBILITY WILL INCLUDE THE CONNECTION TO ALL DENTAL EQUIPMENT AND FIXTURES.
- THE CONTRACTOR SHALL, SUPPLY AND INSTALL ALL ITEMS, ARTICLES, MATERIALS OPERATIONS, INCLUDE ALL LABOR, EQUIPMENT AND TOOLS NECESSARY TO COMPLETE ALL SYSTEMS SHOWN IN THE DRAWINGS RENDERING A COMPLETE AND OPERATIONAL INSTALLATION. TEST AND VERIFY ALL EQUIPMENT INSTALLED UNDER THIS CONTRACT AND INSTRUCT OWNERS REPRESENTATIVE IN THE OPERATION OF THE EQUIPMENT.
- THE CONTRACTOR SHALL, SUBMIT A "CERTIFICATE OF GUARANTEE" FOR WORKMANSHIP AND MATERIALS, FOR ONE YEAR FROM THE DATE OF OCCUPANCY. THIS GUARANTEE SHALL BIND THE CONTRACTOR TO CORRECT, REPAIR OR REPLACE PROMPTLY ANY DEFECTIVE EQUIPMENT OR WORKMANSHIP UNDER THIS CONTRACT WITHOUT COST TO THE OWNER.
- THE CONTRACTOR SHALL REMOVE ALL DEBRIS FROM THE CONSTRUCTION SITE AND ENSURE THAT ALL PUBLIC SPACES ARE FREE OF CONSTRUCTION MATERIALS AND DEBRIS THROUGHOUT THE DURATION OF THE CONTRACT. CONTRACTOR IS RESPONSIBLE FOR TOTAL CLEAN UP OF JOB SITE UPON COMPLETION, INCLUDING ALL CARTONS AND DEBRIS AFTER EQUIPMENT INSTALLATION BY SINCLAIR DENTAL.
- CONTRACTOR TO ARRANGE FOR ELECTRICAL DISCONNECTION AND TEMPORARY POWER AND MECHANICAL DISCONNECTION IF AND WHEN REQUIRED.
- A) THE CONTRACTOR SHALL SUPPLY ALL FASTENINGS, ANCHORS, ACCESSORIES AND ADHESIVES REQUIRED FOR FABRICATION AND ERECTION OF WORK. KEEP EXPOSED FASTENINGS TO A MINIMUM, EVENLY SPACED OUT AND NEATLY LAID OUT.
 B) FLOORING FINISHES TO BE CONTINUOUS UNDERNEATH MILLWORK.
- PRIOR TO CLOSING WALLS AND POURING CONCRETE FLOORS THE CONTRACTOR SHALL CONTACT THE SINCLAIR SALES CONSULTANT OR INSTALL TECHNICIAN FOR FINAL INSPECTION OF PLUMBING, ELECTRICAL AND WOOD SUPPORTS.
- MINISTRY OF HEALTH X-RAY RADIATION PLAN APPROVAL SHALL BE CONDUCTED BY SINCLAIR DENTAL. THE APPROVED PLAN SHALL CONSTITUTE THE LEAD LINING REQUIREMENTS. ANY CHANGES TO THIS OFFICE LAYOUT WILL REQUIRE RE-SUBMISSION OF THE X-RAY RADIATION PLAN TO THE MINISTRY OF HEALTH FOR APPROVAL. THE CONTRACTOR MUST INFORM THE SINCLAIR DESIGN SERVICES DEPT. OF ANY CHANGES.
- EQUIPMENT INSTALLATION AND COORDINATION.
 A) THE CONTRACTOR SHALL PARTICIPATE AT JOB SITE COORDINATION MEETINGS WITH SINCLAIR REPRESENTATIVES AND INSURE ATTENDANCE OF THE APPROPRIATE TRADES PEOPLE.
 B) A PRE-CONSTRUCTION MEETING IS REQUIRED WITH THE CONTRACTOR AND SINCLAIR, AT THIS TIME ALL AVAILABLE TEMPLATES CRITICAL TO INSTALLATION WILL BE DISTRIBUTED BY THE SALES CONSULTANT.
 C) A SINCLAIR REPRESENTATIVE WILL INSPECT THE JOB SITE PRIOR TO THE INSTALLATION OF THE DENTAL EQUIPMENT AT WHICH TIME ALL FINISHES (CEILING, FLOORING, PAINTING AND DECORATING) AND MECHANICAL WORK MUST BE COMPLETED.
 D) SINCLAIR WILL REQUIRE THAT ALL APPLICABLE TRADES BE REPRESENTED AT THE TIME OF INSTALLATION.
 E) THE CONTRACTOR IS TO INCLUDE THE FINAL HOOKUP OF ALL DENTAL EQUIPMENT IN THE CONTRACT. THE PROJECT TIMELINE FOR COMPLETION IS TO INCLUDE DENTAL EQUIPMENT INSTALLATION CONDUCTED BY SINCLAIR. THE INSTALLATION DATE TO BE COORDINATED WITH SINCLAIR DENTAL.

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 ALL DIMENSIONS ARE SUBJECT TO JOB SITE VERIFICATION.
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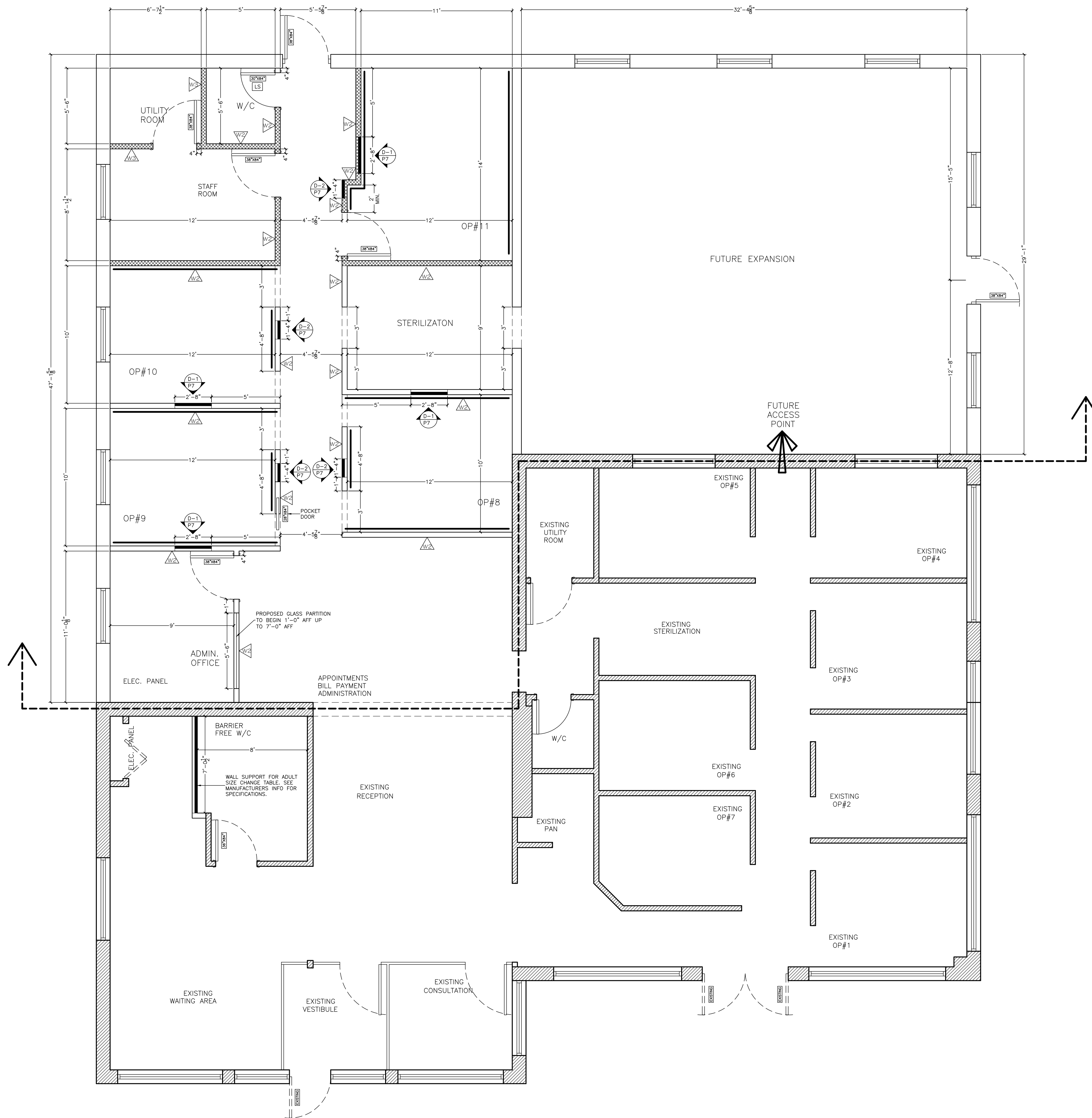
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START DATE: FEB. 19/2020
REV. DATE:

SCALE: 1/4"=1'
FL. AREA: SQ.FT.
DRAWN BY: SL
BCIN:

PROJ. NORTH DWG. NO. P1



PARTITION SPECIFICATIONS:

1. CONTRACTOR TO CHALK FLOOR PLAN ON SITE AND VERIFY ALL DIMENSIONS AND REPORT ANY DISCREPANCIES TO SINCLAIR DENTAL DESIGN SERVICES DEPT. ALL WALL INTERSECTIONS ARE AT 90° UNLESS OTHERWISE NOTED.
2. PLAN APPROVAL FROM THE MINISTRY OF HEALTH X-RAY INSPECTION SERVICE IS NOT INCLUDED IN THIS SET. LEAD LINING INDICATED ON PLAN IS FOR GUIDANCE ONLY. THE APPROVED PLAN FROM THE MINISTRY OF HEALTH SHALL CONSTITUTE THE LEAD LINING REQUIREMENTS. APPLICATION TO THE MINISTRY OF HEALTH IS A SERVICE THAT IS AVAILABLE FROM SINCLAIR DENTAL. IT IS THE DOCTOR'S RESPONSIBILITY TO ENSURE THAT THE AS BUILT PLAN IS APPROVED BY THE MINISTRY OF HEALTH X-RAY INSPECTION SERVICE.
3. ALL WORK TO CONFORM TO THE PROVINCIAL BUILDING CODE.
4. CONTRACTOR TO PROVIDE 1/2" WIDE STRIP OF 3/4" PLYWOOD BACKING BETWEEN STUDS FOR ALL UPPER CABINETS INCLUDING CABINETS THAT ARE SUPPLIED BY SINCLAIR DENTAL. PLYWOOD SUPPORT MUST BE PROVIDED FOR ALL WALL HUNG GRAB BARS, COAT HOOKS, ANY WALL HUNG SINKS AND WASHROOM ACCESSORIES.
5. WHERE DETAIL IS NOT PROVIDED USE THE MANUFACTURERS SPECIFICATIONS AND TEMPLATES FOR ALL EQUIPMENT PRE-INSTALLATION REQUIREMENTS.
6. ALL EXISTING SUPPORT COLUMNS TO BE FINISHED WITH METAL STUDS OR FURRING CHANNELS TO SUIT SITE CONDITIONS, AND 1/2" DRYWALL.
7. ANY PENETRATIONS OR DAMAGE TO FIRE RATED DEMISING WALLS TO BE PACKED AND SEALED WITH APPROVED MATERIAL TO RETAIN FIRE RATING. REPAIRS TO ANY WALL OR SYSTEMS DAMAGED DURING THE EXECUTION OF WORK WILL BE AT THE CONTRACTORS COST.

- EXISTING WALL TO REMAIN AS IS, CONTRACTOR TO MAKE GOOD & READY FOR FINAL FINISH.
- NEW PARTITION WALL, 3/4" STEEL STUDS @ 16" O/C WITH METAL TOP AND BOTTOM PLATE AND 1/2" DRYWALL ON BOTH SIDES. MAKE READY FOR FINISH.
- NEW PARTITION WALL WITH SOUND INSULATION, 3/4" STEEL STUDS @ 16" O/C WITH ROXUL SAFE AND SOUND INSULATING BATTS BETWEEN STUDS, METAL TOP AND BOTTOM PLATE AND 1/2" DRYWALL ON BOTH SIDES. PARTITION HEIGHT TO 12" ABOVE FINISHED CEILING UNLESS OTHERWISE NOTED. MAKE READY FOR FINISH.
- NEW PARTITION WALL WITH PLYWOOD SUPPORT FOR DENTAL EQUIPMENT, 3/4" METAL STUD WALL @ 16" O/C WITH METAL TOP AND BOTTOM PLATE AND 1/2" DRYWALL ON BOTH SIDES. SEE DETAILS PROVIDED. 2 LAYERS OF 5/8" G15 PLYWOOD FOR WALL MOUNTED X-RAY MACHINES. 1 LAYER OF 3/4" PLYWOOD FOR REMOTE LOCATED CONTROL BOX IF SETUP REQUIRES, SEE DETAILS.
- PARTITION AS SPECIFIED W/ 0.5mm MEDICAL GRADE LEAD FROM 1'-0" AFF TO A MINIMUM OF 7'-0" AFF. LEAD SHEETS TO BE ATTACHED TO STUDS W/ BUTON HEAD METAL STUD SCREWS. LEAD BARRIER MUST BE CONTINUOUS, OVERLAP SEAMS.
- NEW PARTITION WALL W/ FRAMED GLASS, 3/4" STEEL STUDS @ 16" O/C WITH METAL TOP AND BOTTOM PLATE AND 1/2" DRYWALL ON BOTH SIDES. GLASS FRAMED INSIDE STUD WALL, DETAILS AS NOTED ON PLAN. MAKE READY FOR FINISH.
- NEW HEADER OVER PARTITION WALL OPENING, HEADER HEIGHT AT 7'-0" AFF. 3/4" STEEL STUDS @ 16" O/C WITH METAL TOP PLATE AND 1/2" DRYWALL ON BOTH SIDES. 1/2" DRYWALL FINISH ON INNER SIDES OF WALL OPENING. MAKE READY FOR FINISH.

- PARTITION HEIGHTS**
- PARTITION HEIGHT TO BE A MINIMUM OF 7'-0" AFF. FINISHED HEIGHT TO BE DETERMINED BY CLIENT.
 - PARTITION HEIGHT TO UNDERSIDE OF FINISHED CEILING, SEE RCP FOR HEIGHT.
 - PARTITION HEIGHT TO UNDERSIDE OF BUILDING STRUCTURE OR ROOF DECK, SECURE TO BUILDING STRUCTURE. WALL HEIGHT NOT TO EXCEED 12'-0" AFF, PROVIDE A DRYWALL CEILING AT 12'-0" AFF WITH ROXUL SAFE AND SOUND INSULATING BATTS ABOVE CEILING. DRYWALL TO BE CONTINUOUS.

- DOOR ACCESSORIES**
- ALL DOOR HANDLES TO BE BARRIER FREE LEAVER TYPE HANDLES. TYPE AND FINISH BY CLIENT OR INTERIOR DESIGNER.
 - LOCK SET

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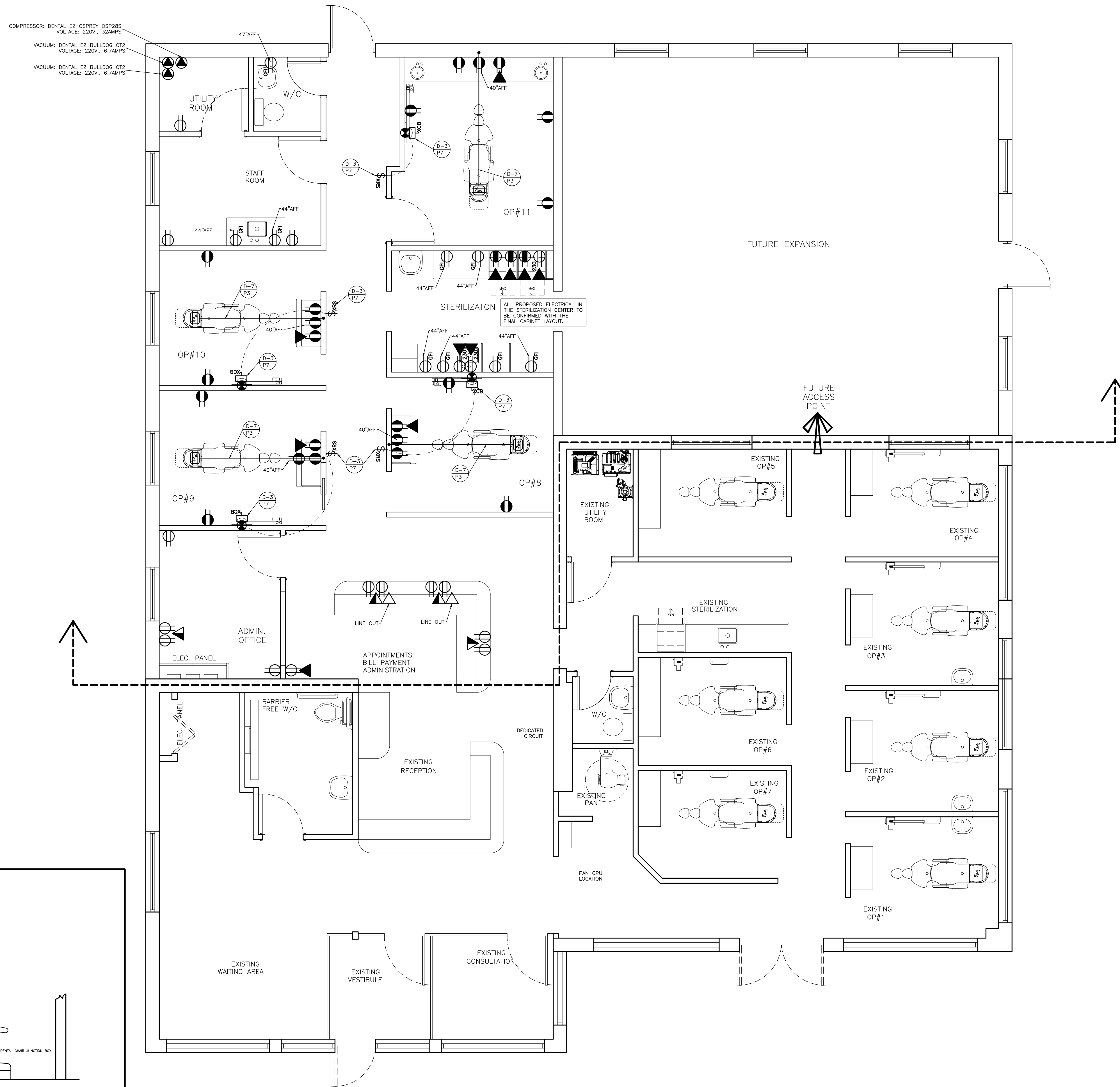


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START DATE:	FEB. 19/2020
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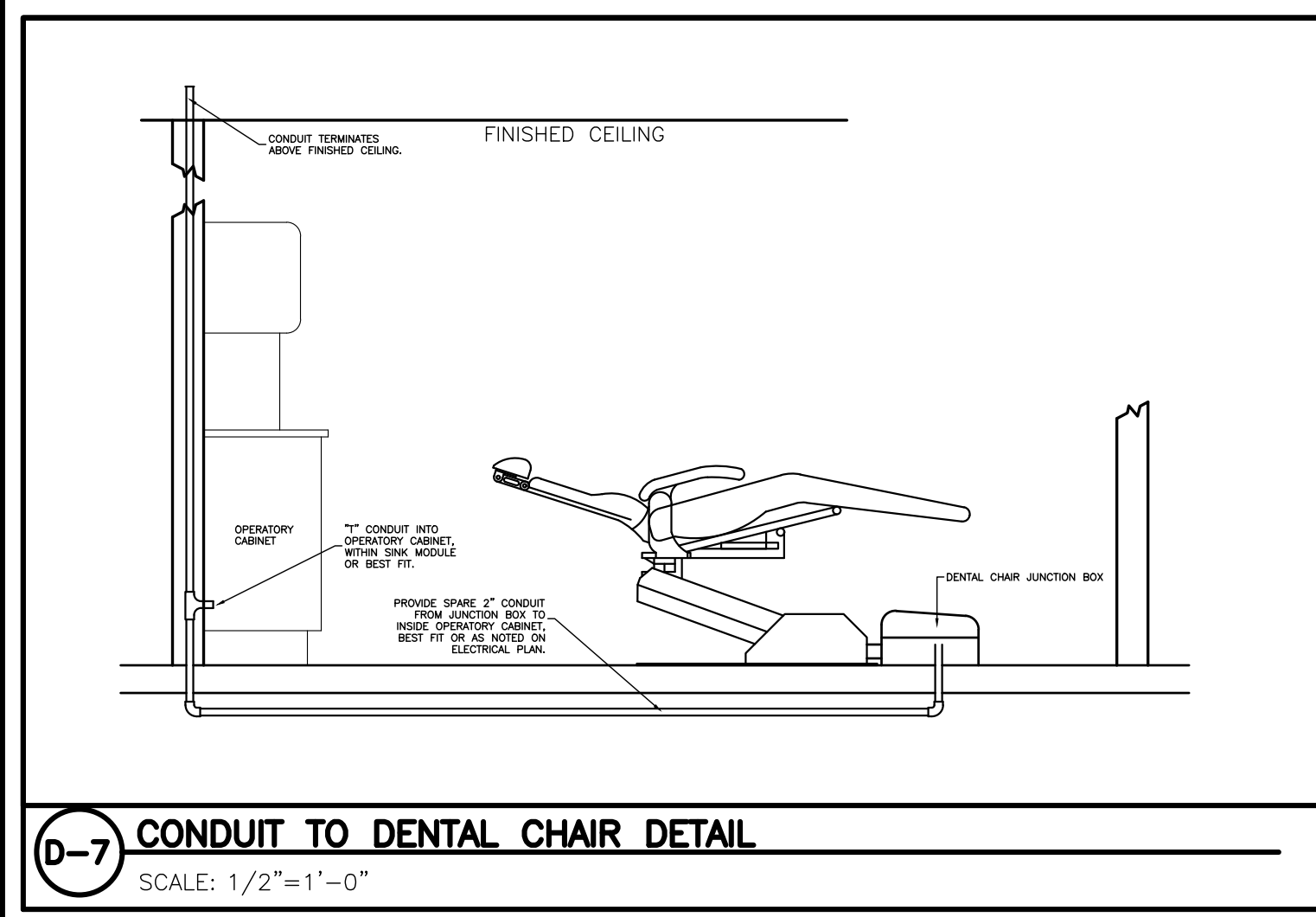
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 DRAWN BY: SL
 BCIN:
 P2
 PROJ. NORTH DWG. NO.



ELECTRICAL SPECIFICATIONS:

1. ALL ELECTRICAL INSTALLATIONS MUST CONFORM TO THE ELECTRICAL SAFETY AUTHORITY AND BASE BUILDING STANDARDS THAT MAY CONSTITUTE PART OF THE LANDLORD TENANT AGREEMENT. OPERATORIES WITHIN DENTAL OFFICES ARE DESIGNATED AS INTERMEDIATE PATIENT CARE AREAS UNDER CSA STANDARD Z32-09.
2. PROVIDE WATERPROOF / FIRE PROOF SEALANT FOR ALL SERVICES PENETRATING FLOOR ASSEMBLIES AS REQUIRED.
3. ALL WALL COVER PLATES ARE TO BE DECORA WHITE PLASTIC, UNLESS OTHERWISE AGREED UPON WITH CLIENT. WHERE TWO OR MORE OUTLETS OR SWITCHES OCCUR IN ONE LOCATION, A GANG SHALL BE USED.
4. ELECTRICIAN IS RESPONSIBLE FOR FINAL CONNECTION OF DENTAL EQUIPMENT AT TIME OF INSTALLATION, TO BE COORDINATED WITH SINCLAIR DENTAL PROJECT REPRESENTATIVE. ALL DENTAL EQUIPMENT REQUIRING A HARD WIRE CONNECTION TO BE CONNECTED POST INSTALL BY THE CONTRACTED ELECTRICIAN.
5. ELECTRICIAN IS TO VISIT THE SITE TO DETERMINE AVAILABILITY OF ELECTRICAL SUPPLY TO SITE AND PROVIDE PORTABLE POWER AS REQUIRED TO COMPLETE THE JOB.
6. COORDINATE WITH CONTRACTOR FOR LOCATION OF EMERGENCY LIGHT FIXTURES AND EMERGENCY EXIT LIGHTS AS REQUIRED BY LOCAL CODES.
7. COORDINATE WITH PLUMBER FOR ELECTRICAL SUPPLY TO HOT WATER HEATER AND COLD WATER ELECTRIC SOLENOID VALVE.
8. CONTRACTOR TO PROVIDE, AS A MINIMUM, 100AMP THREE PHASE, 42 CIRCUIT ELECTRICAL PANEL, GOVY DISCONNECT, 100AMP DISCONNECT, 45KVA TRANSFORMER AND ALL DISTRIBUTION AND CONNECTION BOXES AND CABLES. IF BUILDING SUPPLY IS SINGLE PHASE A 200AMP SERVICE IS REQUIRED. THIS WILL NOT BE REQUIRED IF IT IS SUPPLIED AS PART OF THE LANDLORD TENANT AGREEMENT, CONFIRM WITH CLIENT.

- DECORA DUPLEX RECEPTACLE 5-15R, 120VAC, 15AMP, 1P., 1 2" AFF. OR AS NOTED. (MAX. 6 PER CIRCUIT)
- DECORA DUPLEX RECEPTACLE 5-20R, DEDICATED CIRCUIT, 120VAC, 20AMP, 1P. 1 2" AFF OR AS NOTED.
- DECORA HOSPITAL GRADE DUPLEX RECEPTACLE 5-20R, 120V, 20AMP 1P. 1 2" AFF. OR AS NOTED (MAX. 6 PER CIRCUIT).
- DECORA GROUND FAULT INSULATED DUPLEX RECEPTACLE, 5-15R, 120VAC, 15AMP, 1P. 1 2" AFF OR AS NOTED. (MAX. 6 PER CIRCUIT).
- FLOOR MOUNTED COMPACT DUPLEX RECEPTACLE, 5-20R, FOR DENTAL CHAIR. HOSPITAL GRADE 120VAC, 20AMP, 1P. USE EMT CONDUIT BELOW FIN FLOOR.
- 230V, 15AMP, RECEPTACLE, G-15R DEDICATED 2P CIRCUIT FOR DENTAL EQUIPMENT, WITH 7500 VA TRANSFORMER WIRING IN LINE AND LOCATED AT ELECTRICAL PANEL. 1 2" AFF. OR AS NOTED
- 230V, 2P DEDICATED CIRCUIT TO WALL MOUNTED DISCONNECT BOX, CONNECTED TO STEP UP TRANSFORMER 7500 VA, HARDWIRED TO DENTAL EQUIPMENT USING BX CABLE. SEE EQUIPMENT SPECIFICATIONS FOR CIRCUIT REQUIREMENTS, PROVIDE 20AMP CIRCUIT MIN. UNLESS OTHERWISE NOTED.
- COMMUNICATIONS OUTLET, VOICE LINE SINGLE JACK 1 2" AFF OR AS NOTED. PROVIDE ALL WIRE FOR PHONE SYSTEM TO BE INSTALLED. CONSULT WITH CLIENT FOR SYSTEM REQUIREMENTS.
- COMPUTER NETWORK DATA LINE SINGLE JACK 1 2" AFF OR AS NOTED. PROVIDE CAT6 CABLE RUNS TO CENTRAL HUB LOCATION.
- COMBINED VOICE AND COMPUTER NETWORK DATA DOUBLE JACK 1 2" AFF OR AS NOTED. PROVIDE ALL WIRE FOR PHONE SYSTEM TO BE INSTALLED. CONSULT WITH CLIENT FOR VOICE SYSTEM REQUIREMENTS.
- 2" EMT CONDUIT BELOW FINISHED FLOOR FOR ACCESS TO DENTAL CHAIR JUNCTION BOX. DO NOT USE FOR ELECTRICAL SUPPLY TO DENTAL CHAIR. ALL CABLE THROUGH THIS CONDUIT WILL BE PLENUM RATED.
- DENTAL X-RAY EXPOSURE SWITCH. PROVIDE A SINGLE GANG BOX AT 52" AFF. WITH 3/4" EMT CONDUIT TO DENTAL X-RAY HEAD LOCATION. SEE X-RAY SPECIFICATIONS. THIS DEVICE IS TO BE USED BY QUALIFIED PERSONNEL ONLY AND NOT INTENDED TO BE USED BY THE GENERAL OCCUPANT OF THE BUILDING.
- DENTAL X-RAY HEAD LOCATION, PROVIDE SINGLE GANG BOX WITH 3/4" EMT CONDUIT TO DENTAL EXPOSURE SWITCH. SEE X-RAY DETAILS AND SPECIFICATIONS.
- X-RAY CONTROL BOX, PROVIDE DEDICATED HOSPITAL GRADE CIRCUIT, 120VAC, 15AMP, 1P, SLOW BLOW CIRCUIT HARDWIRED TO X-RAY CONTROL BOX, PROVIDE A MANUAL DISCONNECT SWITCH AT ELECTRICAL PANEL. SEE X-RAY SPECIFICATIONS AND DETAILS.



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ELECTRICAL PLAN

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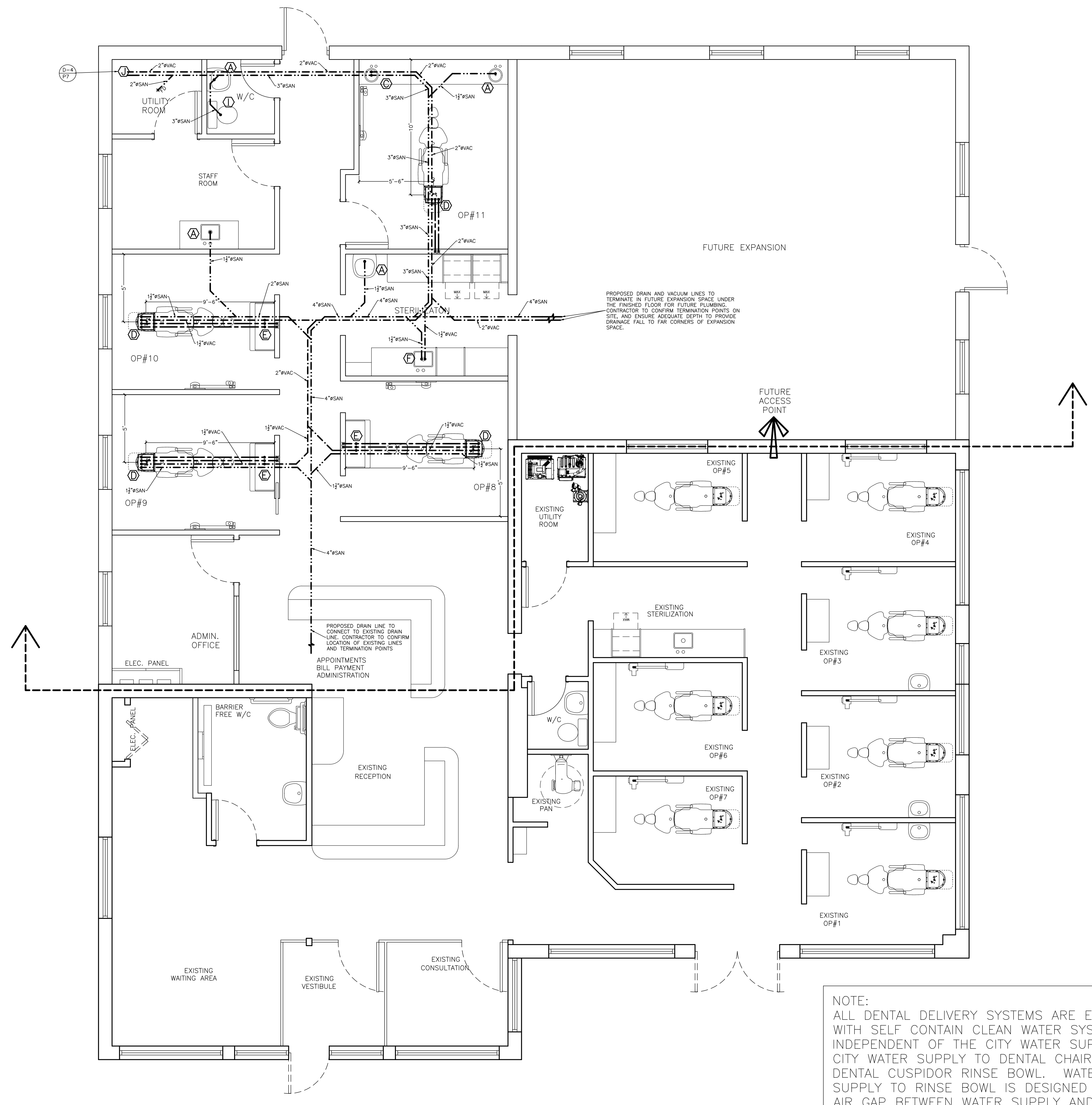
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FL. AREA: SQ.FT.

DRAWN BY: SL

BCIN:

PROJ. NORTH DWG. NO. P3



PLUMBING SPECIFICATIONS:

1. ALL PLUMBING MUST CONFORM TO THE PROVINCIAL BUILDING CODE AND BASE BUILDING STANDARDS.
2. CONTRACTOR IS RESPONSIBLE FOR ALL FLOOR CUTTING OR CORING AS REQUIRED BY SITE CONDITIONS FOR PLUMBING AND SERVICE LINES BELOW FINISHED FLOOR. ALL SERVICES PENETRATING FLOOR MUST BE SEALED TO MAINTAIN THE EXISTING FIRE RESISTANCE RATING AND WATER PROOFING, AS REQUIRED BY SITE CONDITIONS. MATERIAL ALTERATIONS TO THE EXISTING FLOOR ARE NOT TO DECREASE THE PERFORMANCE LEVEL OF THE FLOOR SYSTEM. CONTRACTOR TO ENSURE THAT NEW FLOOR FILLER IS LEVEL AND SMOOTH TO ACCEPT FLOOR FINISH.
3. PLUMBING CONTRACTOR WILL INSTALL TEMPORARY CAPS OR CLOSURES ON THE ENDS OF ALL PIPES, CONDUITS ETC. TO PREVENT THE ENTRY OF DEBRIS. ALL HOT AND COLD WATER LINES TO BE INSULATED. CONTRACTOR TO PRESSURE TEST ALL SYSTEMS THAT WILL BE UNDER POSITIVE OR NEGATIVE PRESSURE.
4. PLUMBING CONTRACTOR IS RESPONSIBLE FOR FINAL CONNECTION OF DENTAL EQUIPMENT AT TIME OF EQUIPMENT INSTALLATION. COORDINATE WITH DENTAL EQUIPMENT SUPPLIER.
5. PROVIDE 1/2" HOT & COLD WATER SUPPLY AND 1/2" TRAPPED AND VENTED DRAIN TO ALL DOMESTIC SINKS.
6. ALL 1/2" AIR AND 1/2" WATER LINES OTHER THAN SINK CONNECTIONS MUST BE FINISHED WITH MANUAL SHUTOFF VALVES RA 1 9/16" COMPRESSION FITTINGS.
7. PLUMBER TO SUPPLY AND INSTALL BACK FLOW PREVENTION VALVES AND/OR R.P. VALVES AS PER PLUMBING CODES AND REGULATIONS FOR DENTAL EQUIPMENT. VALVES MUST BE ACCESSIBLE FOR ROUTINE MAINTENANCE.

- (A) 1/2" HOT WATER LINE WITH SHUTOFF VALVE.
- (B) 1/2" COLD WATER LINE WITH SHUTOFF VALVE.
- (C) 1/2" TRAPPED AND VENTED WASTE LINE TO CABINET MOUNTED SINK. SINK HEIGHT WILL VARY CONFIRM HEIGHT WITH CABINET SPECIFICATIONS.
- (D) 1/2" HOT WATER LINE WITH SHUTOFF VALVE.
- (E) 1/2" COLD WATER LINE WITH TWO PARALLEL SHUTOFF VALVES.
- (F) AIR LINE WITH SHUTOFF VALVE.
- (G) VACUUM LINE WITH 1/2" COPPER ROUGH-IN.
- (H) TRAPPED AND VENTED WASTE LINE TO CABINET MOUNTED SINK. SINK HEIGHT WILL VARY CONFIRM HEIGHT WITH CABINET SPECIFICATIONS.
- (I) DENTAL CHAIR PLUMBING SERVICES ROUGH-IN FROM BELOW FINISHED FLOOR. SEE DENTAL CHAIR MANUFACTURERS TEMPLATE FOR ROUGH-IN DETAILS.
- (J) COLD WATER LINE WITH SHUTOFF VALVE.
- (K) AIR LINE WITH SHUTOFF VALVE.
- (L) VACUUM LINE WITH 1/2" COPPER ROUGH-IN.
- (M) TRAPPED AND VENTED WASTE LINE, 1" TRAP TO BE BELOW FINISHED FLOOR.
- (N) 1/2" COLD WATER LINE WITH TWO PARALLEL SHUTOFF VALVES.
- (O) AIR LINE WITH SHUTOFF VALVE.
- (P) VACUUM LINE WITH 1/2" COPPER ROUGH-IN.
- (Q) MAX. ROUGH-IN HEIGHT ABOVE FINISHED FLOOR TO BE 6" STUB OUT OF WALL OR WITHIN 6" FROM WALL IF SERVICES STUB UP FROM FLOOR. SEE CABINET MANUFACTURERS SPECIFICATIONS.
- (R) 1/2" HOT WATER LINE WITH SINK SHUTOFF VALVE AND 3/4" MALE HOSE BIB FOR INSTRUMENT WASHER.
- (S) 1/2" COLD WATER LINE WITH SINK SHUTOFF VALVE AND 3/4" MALE HOSE BIB FOR INSTRUMENT WASHER.
- (T) AIR LINE WITH SHUTOFF VALVE.
- (U) VACUUM LINE WITH 1/2" COPPER ROUGH-IN.
- (V) TRAPPED AND VENTED WASTE LINE TO CABINET MOUNTED SINK. PROVIDE 3/4" BARBED FITTING FOR INSTRUMENT WASHER DRAIN LINE CONNECTION, UPSTREAM FROM SINK TRAP. SINK HEIGHT WILL VARY CONFIRM HEIGHT WITH CABINET SPECIFICATIONS.
- (W) TOILET FIXTURE ROUGH-IN.
- (X) 1/2" COLD WATER LINE WITH SHUTOFF VALVE STUB OUT OF WALL 8" ABOVE FINISHED FLOOR.
- (Y) 3" VENTED SANITARY WASTE LINE.
- (Z) DENTAL DRY VACUUM PUMP (SUPPLIED). TERMINATE VACUUM LINE RISER, CONNECT TO AMALGAM SEPARATOR AND THEN TO VACUUM PUMP.
- (AA) COLD WATER LINE TO WALL MOUNTED HOSE BIB FOR DRYVAC TANK CLEANING AND MAINTENANCE.
- (AB) 2" VENTED DRAIN LINE STUBBED OUT OF FLOOR, 1" TRAP UNDER FLOOR.
- (AC) 2" SCHEDULE 80 PVC EXHAUST VENT LINE FOR DENTAL DRYVAC. VENT TO OUTSIDE OF BUILDING. DO NOT CONNECT TO SANITARY VENT SYSTEM SEE MANUFACTURERS SPECIFICATIONS FOR DETAILS.
- (AD) 2" FLOOR DRAIN WITH COVER FINISHED WITH FLOOR SURFACE, PRIMMED, TRAPPED AND VENTED.
- (AE) PLUMBING JUNCTION POINT.
- (AF) PLUMBING CONNECTION POINT THROUGH WALL CONNECTING SERVICES BELOW THE FINISHED FLOOR AND ABOVE THE FINISHED CEILING.

PLUMBING LEGEND

	1/2" COLD WATER SUPPLY TYPE L OR K COPPER.
	1/2" COMPRESSED AIR LINE TYPE L OR K COPPER.
	DENTAL VACUUM LINE, USE SCHEDULE 40 PVC AS PERMITTED BY CODE. USE SCHEDULE 80 PVC IN ALL PLENUM SPACES. SIZE AS NOTED, ALL TRANSITIONS TO BE 45° LONG RADIUS ELBOWS. SLOPE VACUUM LINE BACK TO VACUUM PUMP 4" IN 10'-0".
	DRAIN LINE PVC OR COPPER SCHEDULE 40 PVC AS PERMITTED BY CODE. USE SCHEDULE 80 PVC IN ALL PLENUM SPACES.

NOTE:
ALL DENTAL DELIVERY SYSTEMS ARE EQUIPPED WITH SELF CONTAIN CLEAN WATER SYSTEMS, INDEPENDENT OF THE CITY WATER SUPPLY. CITY WATER SUPPLY TO DENTAL CHAIRS IS FOR DENTAL CUSPIDOR RINSE BOWL. WATER SUPPLY TO RINSE BOWL IS DESIGNED WITH AN AIR GAP BETWEEN WATER SUPPLY AND BOWL.

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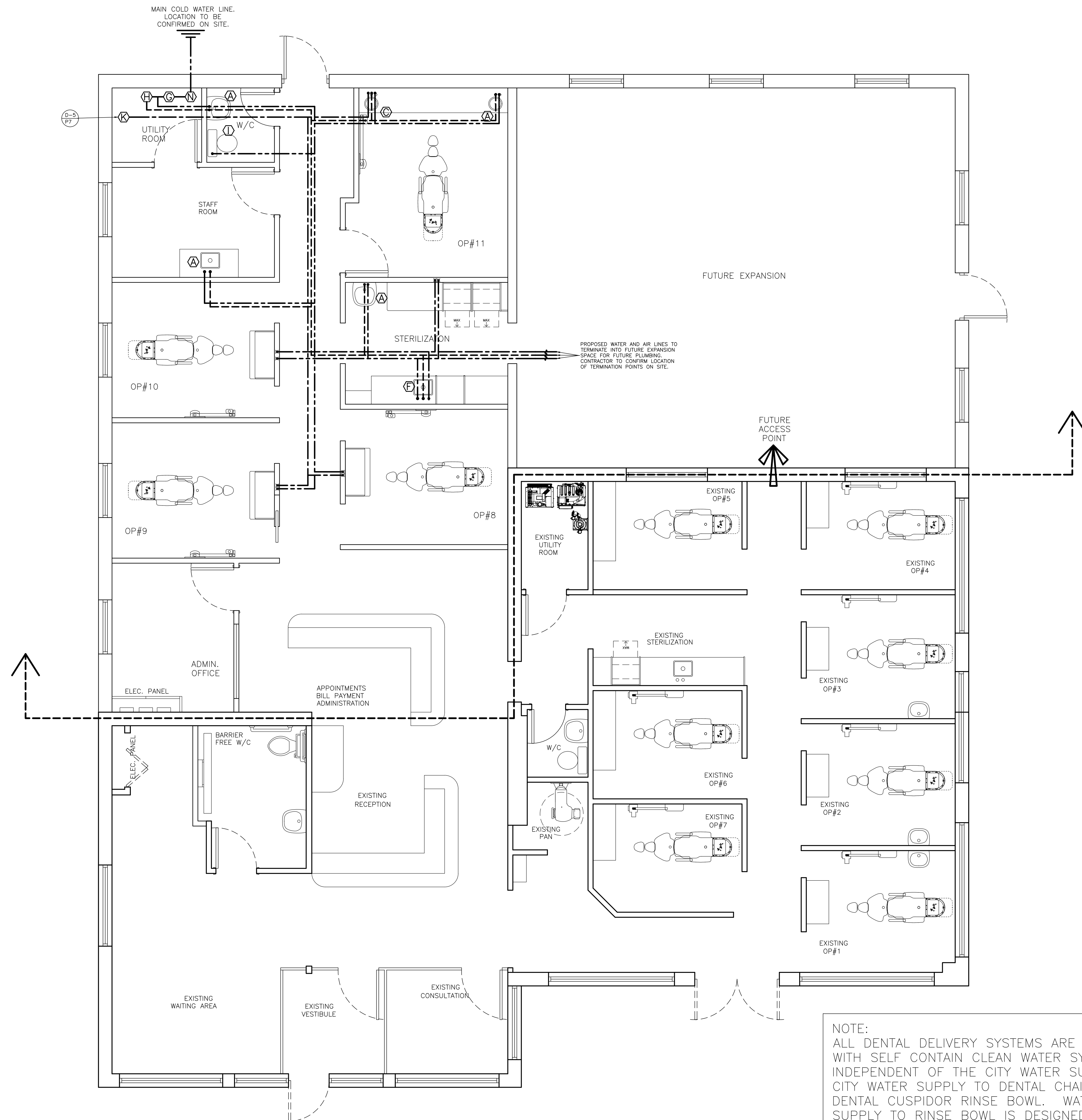
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SALES REP: BRENDA NICHOLS

PLUMBING PLAN BELOW FIN. FLOOR

DENTAL OFFICE
 DR. LUISE MASCARIN
 510 THURNTON ROAD EAST
 OSHAWA, ONT.

SCALE: 1/4"=1'
 FL. AREA: SQ.FT.
 DRAWN BY: SL
 BCIN:
 PROJ. NORTH DWG. NO. P4



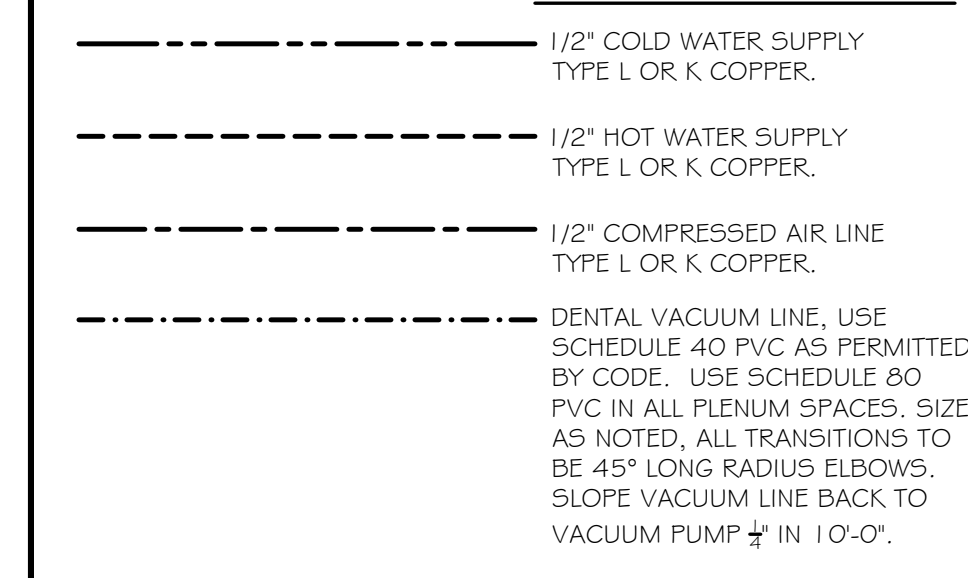
NOTE:
ALL DENTAL DELIVERY SYSTEMS ARE EQUIPPED WITH SELF CONTAIN CLEAN WATER SYSTEMS, INDEPENDENT OF THE CITY WATER SUPPLY. CITY WATER SUPPLY TO DENTAL CHAIRS IS FOR DENTAL CUSPIDOR RINSE BOWL. WATER SUPPLY TO RINSE BOWL IS DESIGNED WITH AN AIR GAP BETWEEN WATER SUPPLY AND BOWL.

PLUMBING SPECIFICATIONS:

1. ALL PLUMBING MUST CONFORM TO THE PROVINCIAL BUILDING CODE AND BASE BUILDING STANDARDS.
2. CONTRACTOR IS RESPONSIBLE FOR ALL FLOOR CUTTING OR CORING AS REQUIRED BY SITE CONDITIONS FOR PLUMBING AND SERVICE LINES BELOW FINISHED FLOOR. ALL SERVICES PENETRATING FLOOR MUST BE SEALED TO MAINTAIN THE EXISTING FIRE RESISTANCE RATING AND WATER PROOFING, AS REQUIRED BY SITE CONDITIONS. MATERIAL ALTERATIONS TO THE EXISTING FLOOR ARE NOT TO DECREASE THE PERFORMANCE LEVEL OF THE FLOOR SYSTEM. CONTRACTOR TO ENSURE THAT NEW FLOOR FILLER IS LEVEL AND SMOOTH TO ACCEPT FLOOR FINISH.
3. PLUMBING CONTRACTOR WILL INSTALL TEMPORARY CAPS OR CLOSURES ON THE ENDS OF ALL PIPES, CONDUITS ETC. TO PREVENT THE ENTRY OF DEBRIS. ALL HOT AND COLD WATER LINES TO BE INSULATED. CONTRACTOR TO PRESSURE TEST ALL SYSTEMS THAT WILL BE UNDER POSITIVE OR NEGATIVE PRESSURE.
4. PLUMBING CONTRACTOR IS RESPONSIBLE FOR FINAL CONNECTION OF DENTAL EQUIPMENT AT TIME OF EQUIPMENT INSTALLATION. COORDINATE WITH DENTAL EQUIPMENT SUPPLIER.
5. PROVIDE 1/2" HOT & COLD WATER SUPPLY AND 1/2" TRAPPED AND VENTED DRAIN TO ALL DOMESTIC SINKS.
6. ALL 1/2" AIR AND 1/2" WATER LINES OTHER THAN SINK CONNECTIONS MUST BE FINISHED WITH MANUAL SHUTOFF VALVES RA 1 9 1/2" COMPRESSION FITTINGS.
7. PLUMBER TO SUPPLY AND INSTALL BACK FLOW PREVENTION VALVES AND/OR R.F. VALVES AS PER PLUMBING CODES AND REGULATIONS FOR DENTAL EQUIPMENT. VALVES MUST BE ACCESSIBLE FOR ROUTINE MAINTENANCE.

- (A) 1/2" HOT WATER LINE WITH SHUTOFF VALVE.
- (B) 1/2" COLD WATER LINE WITH SHUTOFF VALVE.
- (C) 1/2" TRAPPED AND VENTED WASTE LINE TO CABINET MOUNTED SINK. SINK HEIGHT WILL VARY CONFIRM HEIGHT WITH CABINET SPECIFICATIONS.
- (D) 1/2" HOT WATER LINE WITH SHUTOFF VALVE.
- (E) 1/2" COLD WATER LINE WITH TWO PARALLEL SHUTOFF VALVES.
- (F) 1/2" AIR LINE WITH SHUTOFF VALVE.
- (G) VACUUM LINE WITH 1/2" COPPER ROUGH-IN.
- (H) 1/2" TRAPPED AND VENTED WASTE LINE TO CABINET MOUNTED SINK. SINK HEIGHT WILL VARY CONFIRM HEIGHT WITH CABINET SPECIFICATIONS.
- (I) 1/2" HOT WATER LINE WITH SINK SHUTOFF VALVE AND 3/4" MALE HOSE BIB FOR INSTRUMENT WASHER.
- (J) 1/2" COLD WATER LINE WITH SINK SHUTOFF VALVE AND 3/4" MALE HOSE BIB FOR INSTRUMENT WASHER.
- (K) 1/2" AIR LINE WITH SHUTOFF VALVE.
- (L) VACUUM LINE WITH 1/2" COPPER ROUGH-IN.
- (M) 1/2" TRAPPED AND VENTED WASTE LINE TO CABINET MOUNTED SINK. PROVIDE 3/4" BARBED FITTING FOR INSTRUMENT WASHER DRAIN LINE CONNECTION, UPSTREAM FROM SINK TRAP. SINK HEIGHT WILL VARY CONFIRM HEIGHT WITH CABINET SPECIFICATIONS.
- (N) 1/2" ELECTRIC SOLENOID VALVE WITH FILTER CONNECTED TO MAIN INCOMING COLD WATER LINE. ELECTRIC SOLENOID VALVE MAY BE PROVIDED BY DENTAL SUPPLIER. CONFIRM WITH SALES CONSULTANT. CONTRACTOR TO INSTALL ONE WATTS 009 RPZ VALVE, DOWN STREAM FROM SOLENOID AND WATER FILTER AS A MINIMUM REQUIREMENT, CONFIRM WITH LOCAL BY-LAWS. MASTER CONTROLS FOR SOLENOID LOCATED ON ELECTRICAL PLAN. COORDINATE WITH ELECTRICIAN.
- (O) MIN. 20GAL. ELECTRIC HOT WATER TANK.
- (P) 1/2" COLD WATER LINE TO HOT WATER TANK. CONTRACTOR TO SUPPLY HOT WATER TANK UNLESS PROVIDED BY LANDLORD.
- (Q) TOILET FIXTURE ROUGH-IN.
- (R) 1/2" COLD WATER LINE WITH SHUTOFF VALVE STUB OUT OF WALL 8" ABOVE FINISHED FLOOR.
- (S) 3" VENTED SANITARY WASTE LINE.
- (T) DENTAL COMPRESSOR (SUPPLIED).
- (U) TERMINATE 1/2" COPPER AIR LINE AT COMPRESSOR WITH 1/2" MNPT. TERMINATE 2" PVC REMOTE AIR INTAKE, REDUCE TO 1/2" PVC AT DENTAL COMPRESSOR.
- (V) BACKFLOW PREVENTION VALVE. WATTS SERIES 009 RPZ VALVE.
- (W) PLUMBING JUNCTION POINT.
- (X) PLUMBING CONNECTION POINT THROUGH WALL CONNECTING SERVICES BELOW THE FINISHED FLOOR AND ABOVE THE FINISHED CEILING.

PLUMBING LEGEND



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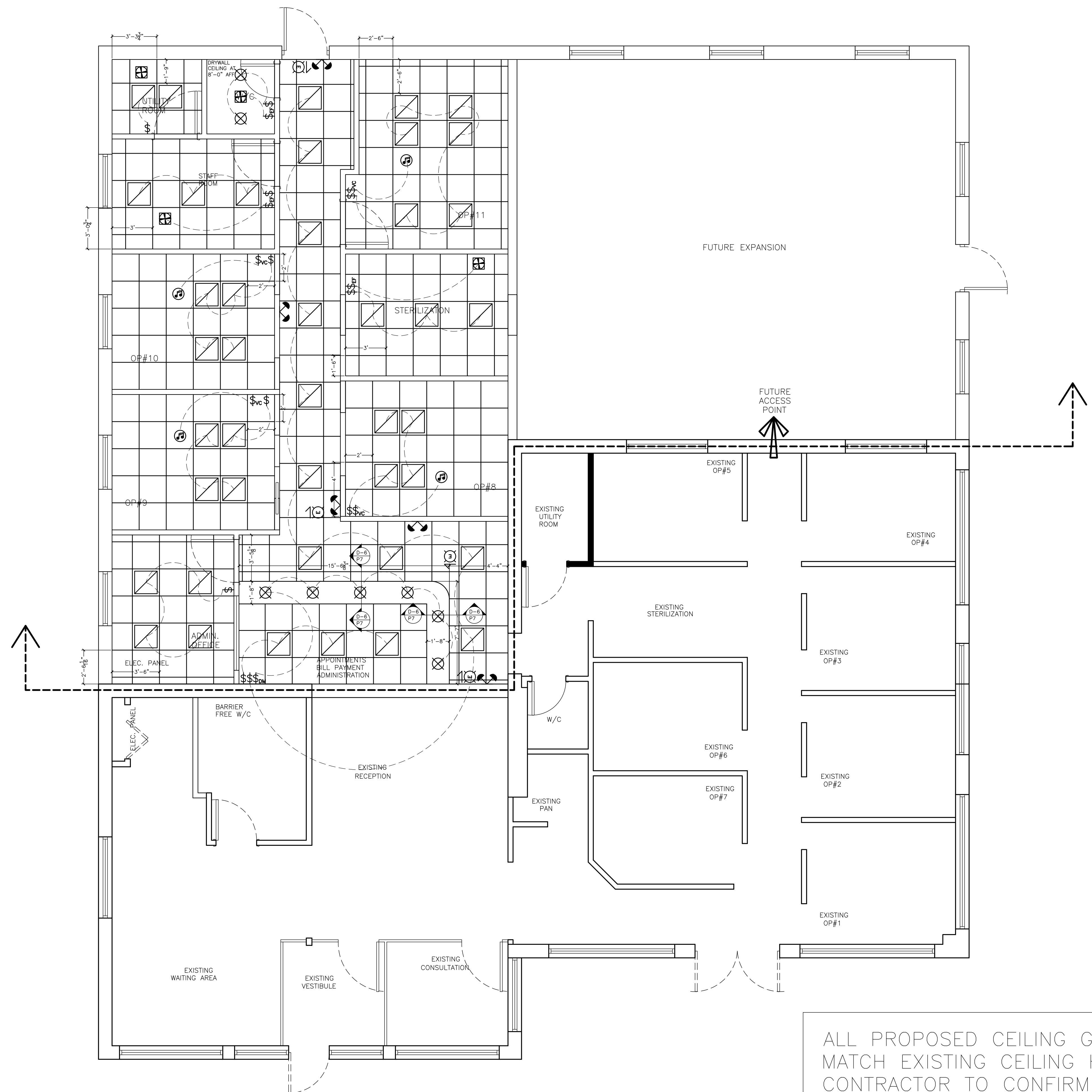
START DATE:
FEB. 19/2020

REV. DATE:

PLUMBING PLAN ABOVE FIN. CILING
DENTAL OFFICE
DR. TRIFE MASCARIN
510 THURNTON ROAD EAST
OSHAWA, ONT.
PHONE#: P5
FAX#:

SCALE: 1/4"=1'
FL. AREA: SQ.FT.
DRAWN BY: SL
BCIN:
PROJ. NORTH DWG. NO.

SALES REP: BRENDA NICHOLLS



ALL PROPOSED CEILING GRID TO MATCH EXISTING CEILING HEIGHT. CONTRACTOR TO CONFIRM CEILING HEIGHT ON SITE.

REFLECTED CEILING SPECIFICATIONS:

1. ALL ELECTRICAL MUST CONFORM TO THE PROVINCIAL ELECTRICAL SAFETY CODE AND BASE BUILDING STANDARDS.
 2. ALL WALL COVER PLATES ARE TO BE DECORA WHITE PLASTIC, OR AS AGREED UPON WITH THE CLIENT. WHERE TWO OR MORE OUTLETS OR SWITCHES OCCUR IN ONE LOCATION A GANG SHALL BE USED.
 3. CONTRACTOR TO COORDINATE WITH ALL SUB TRADES FOR THE LOCATION AND INSTALLATION OF EMERGENCY LIGHTING SYSTEMS AS REQUIRED BY LOCAL CODES AND FIRE PROTECTION AGENCIES.
- 2x2' RECESSED LED LIGHT FIXTURE, WITH A CRI OF 4500K AND HINGED ACRYLIC DIFFUSER. CONFIRM SPECIFICATION WITH CLIENT.
 - RECESSED DIMMABLE LED POT LIGHT FIXTURE TYPE TO BE SPECIFIED BY CLIENT.
 - WALL OR CEILING MOUNTED EMERGENCY LIGHT FIXTURE CAV 2-8W 6V QUARTZ HALOGEN SEALED BEAM LAMPS AND EMERGENCY BATTERY BACKUP AS REQUIRED BY LOCAL CODES.
 - CEILING MOUNTED EMERGENCY EXIT LIGHT W/ 3rd SOCKET WIRED TO EMERGENCY BACKUP CIRCUIT. ARROW DENOTED FACE DIRECTION.
 - RECESSED CEILING MOUNTED MUSIC SPEAKER.
 - WALL MOUNTED VOLUME CONTROL @ 47" AFF OR AS NOTED.
 - SINGLE POLE LIGHT SWITCH @ 47" AFF OR AS NOTED.
 - DIMMER SWITCH FOR COMPACT FLUORESCENT FIXTURES @ 47" AFF OR AS NOTED.
 - EXHAUST FAN SWITCH @ 47" AFF OR AS NOTED.
 - EXHAUST FAN CEILING MOUNTED, VENT TO OUTSIDE. WASHROOM CEILING FANS TO BE 150CFM. UTILITY ROOM CEILING FAN TO BE 300CFM AND OPERATED BY A THERMOSTAT CONTROL LOCATED INSIDE THE UTILITY ROOM.

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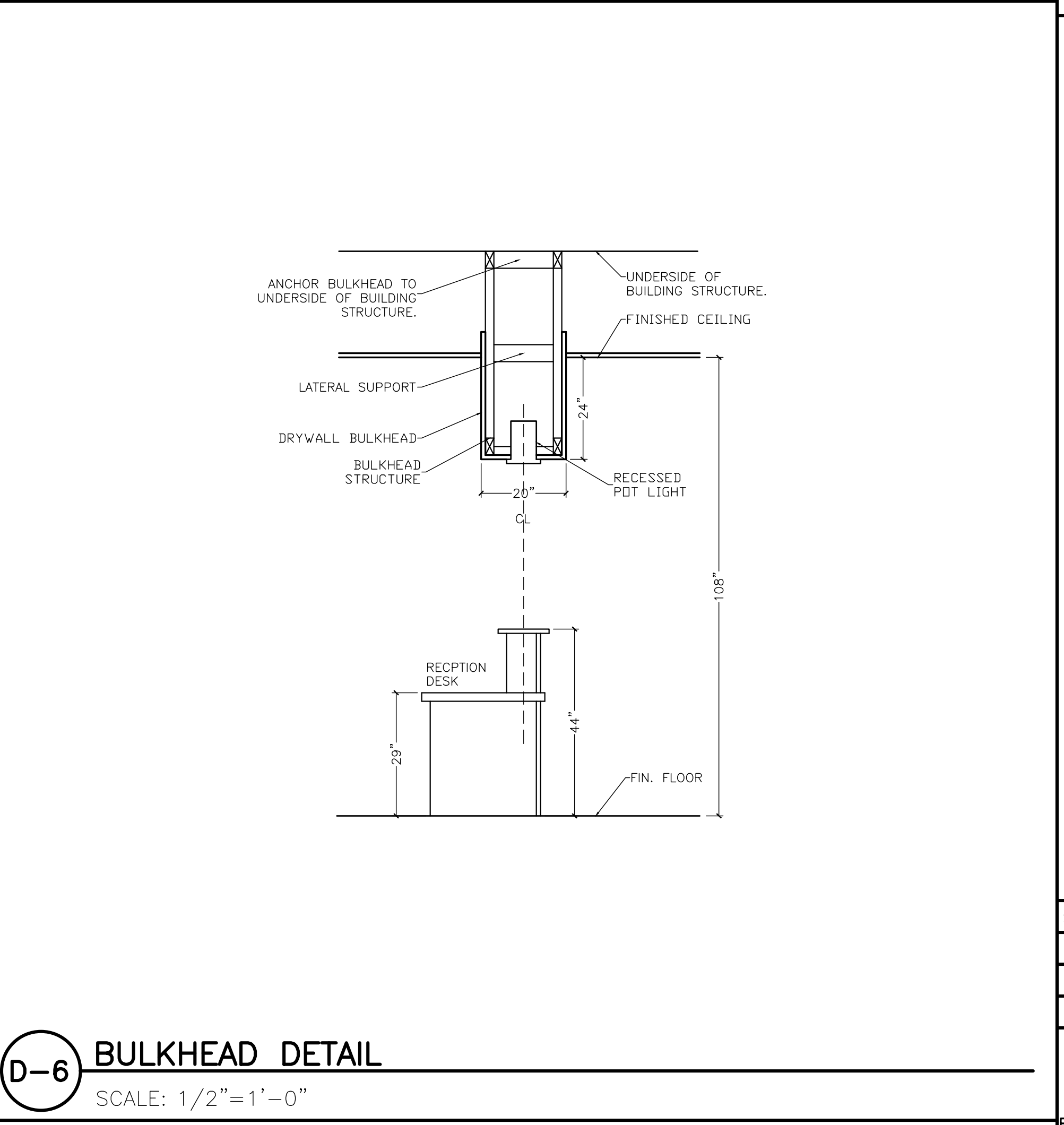
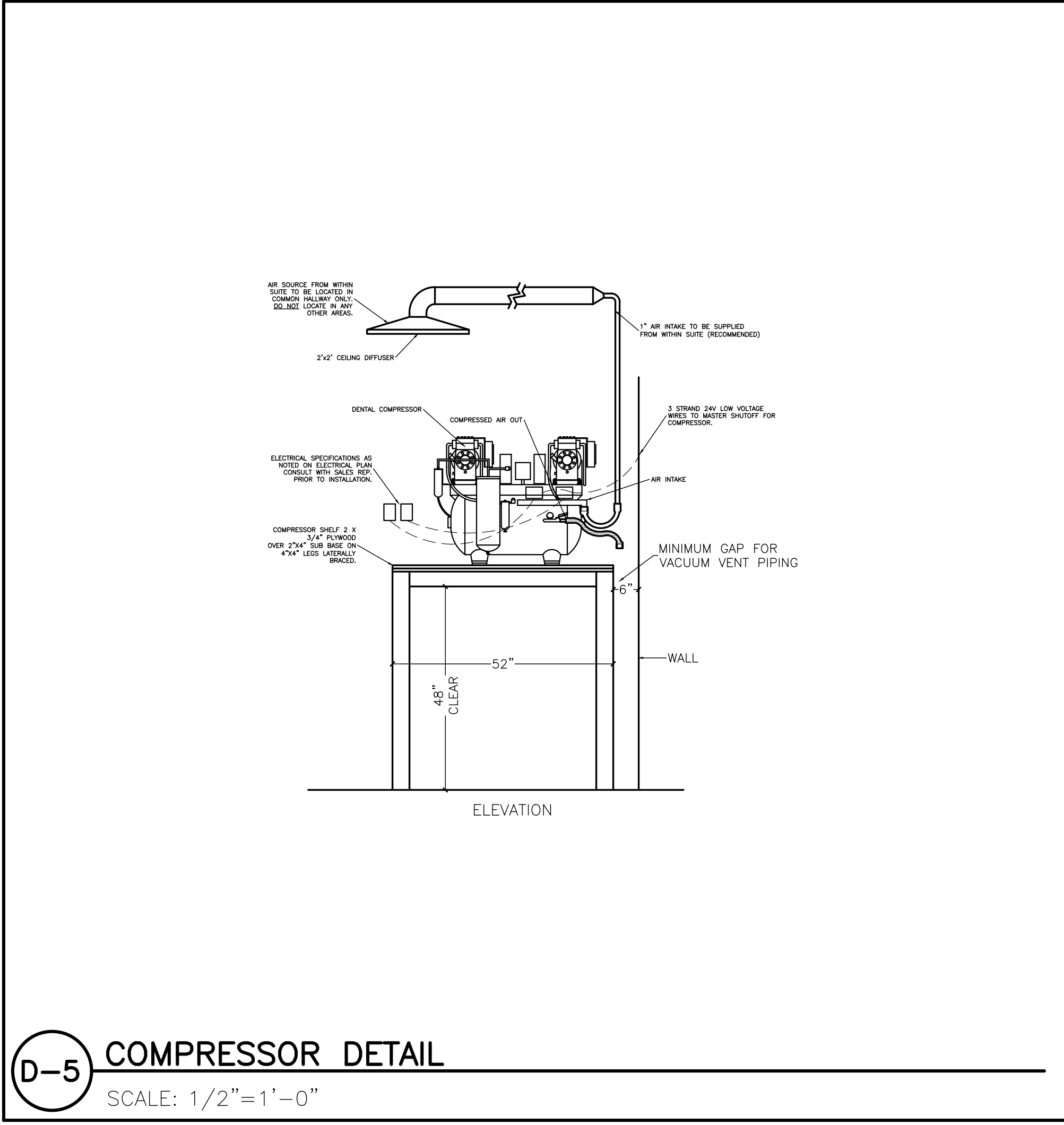
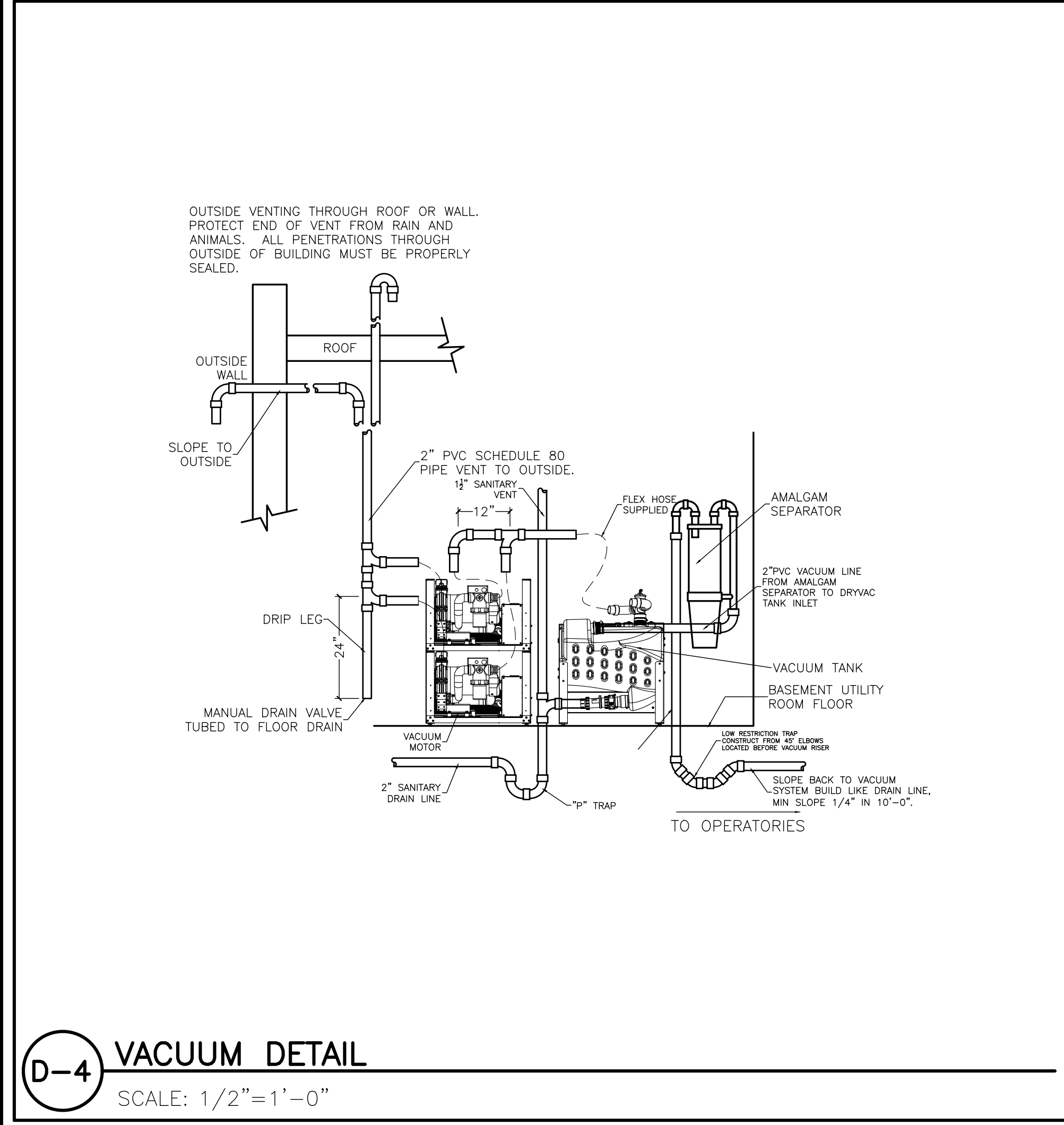
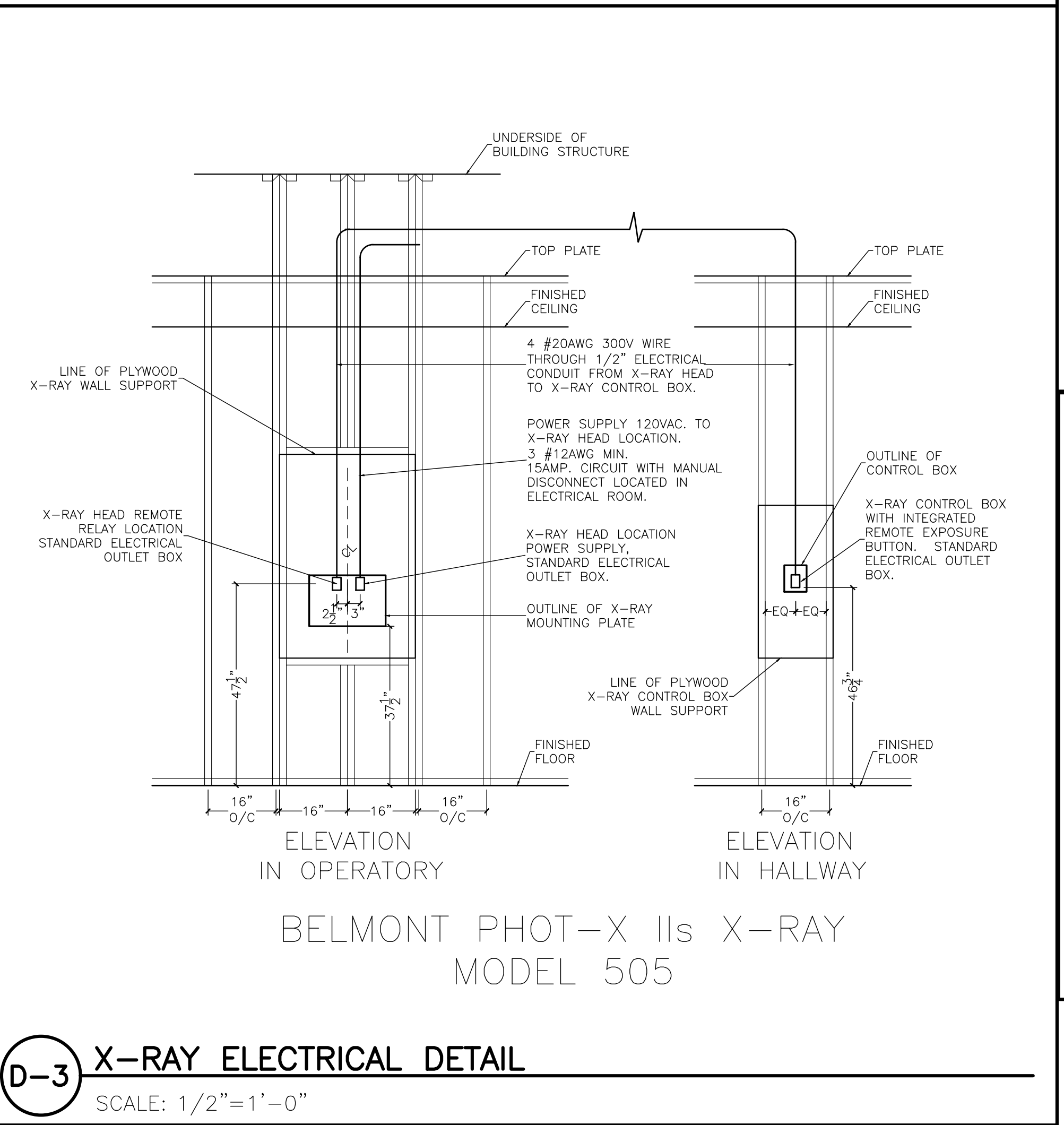
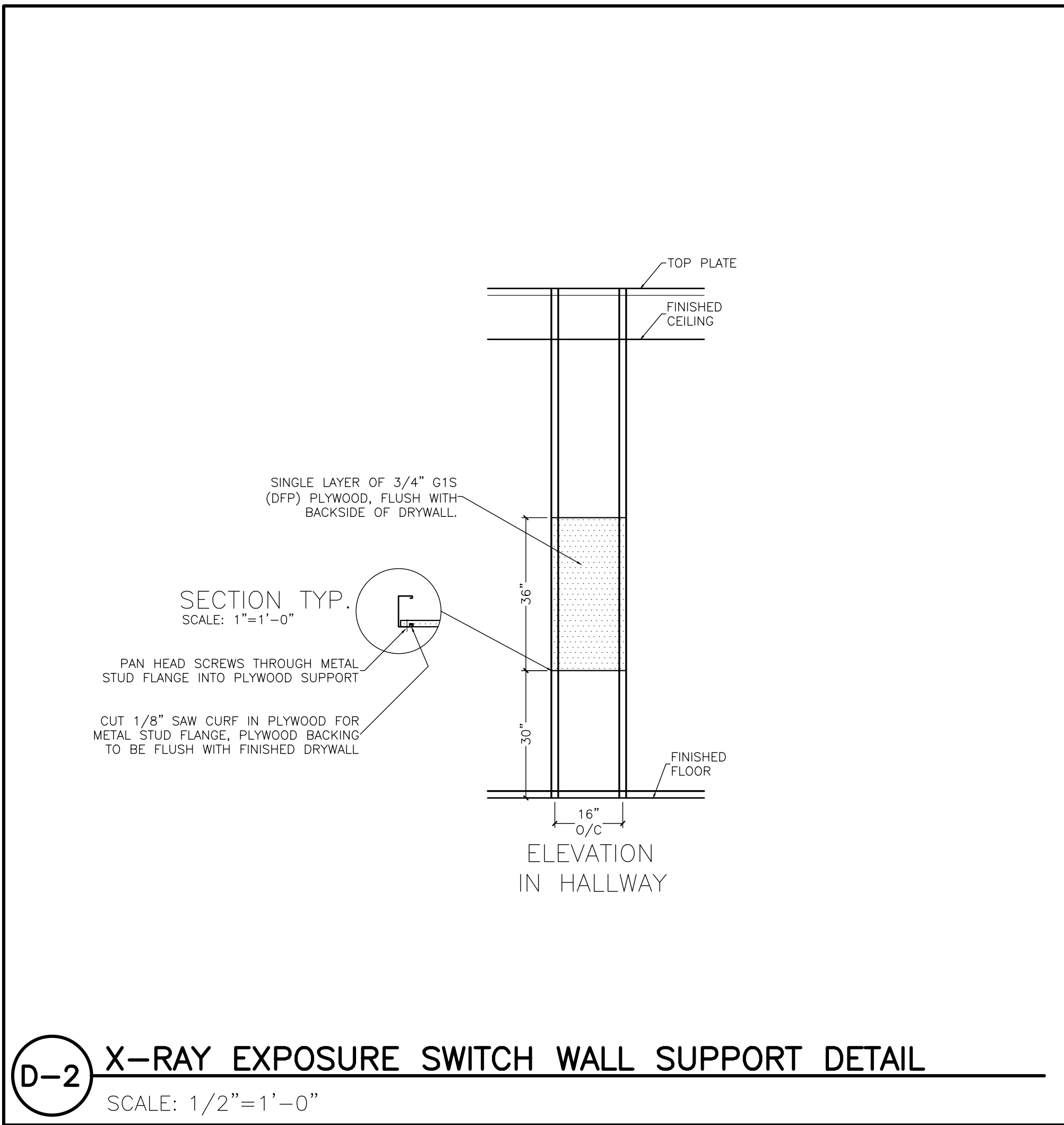
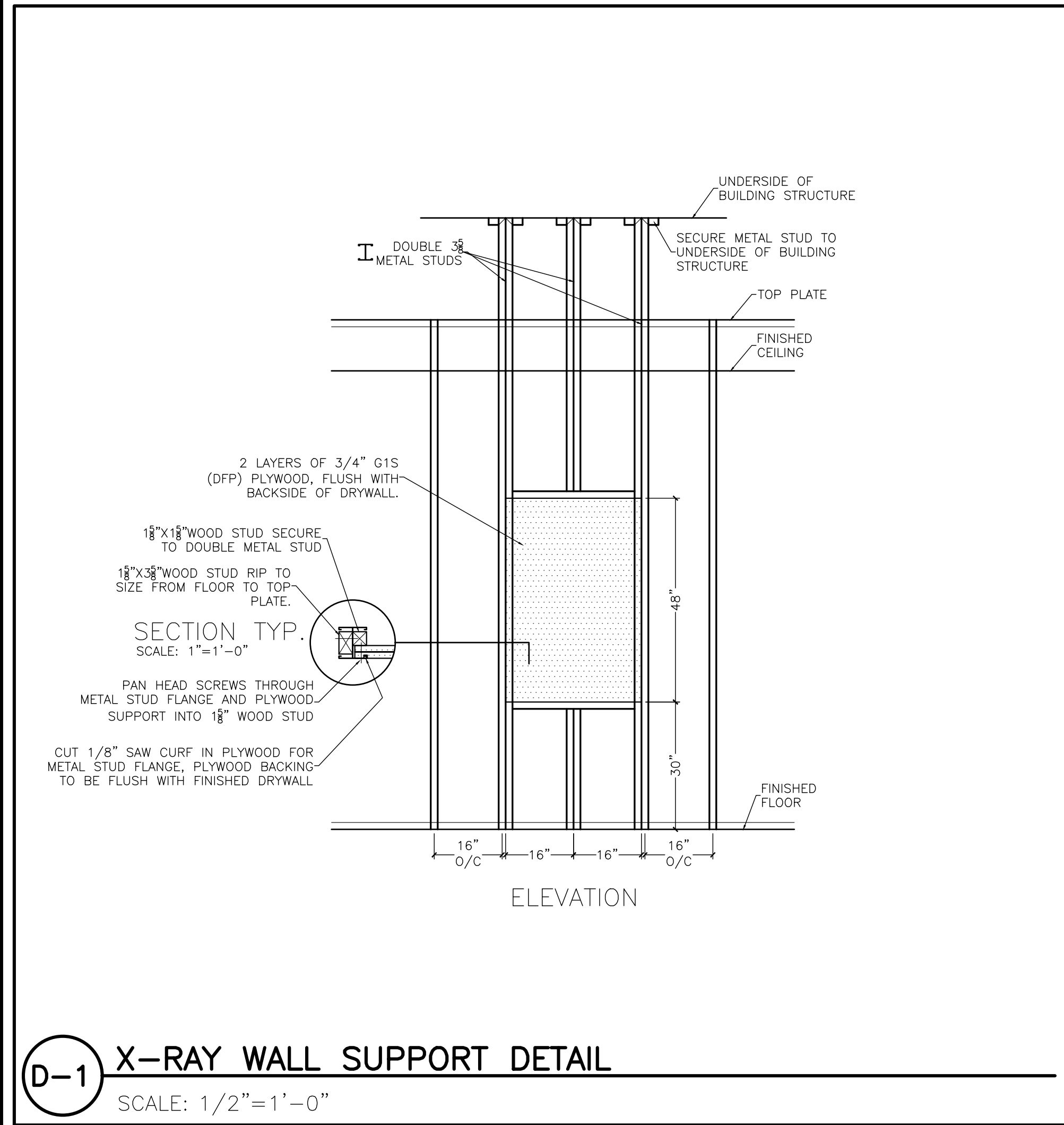


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 REV. DATE:

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 OSHAWA, ONT.
 SALES REP: BRENDA NICHOLLS
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 FAX#: _____

SCALE: 1/4" = 1'
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DETAILS

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PHONE#:
FAX#:

SALES REP: BRENDA NICHOLS

SCALE: 1/4"=1'

FL. AREA:

DRAWN BY: SL

BCIN:

PROJ. NORTH DWG. NO. P7