

**Hospital:**

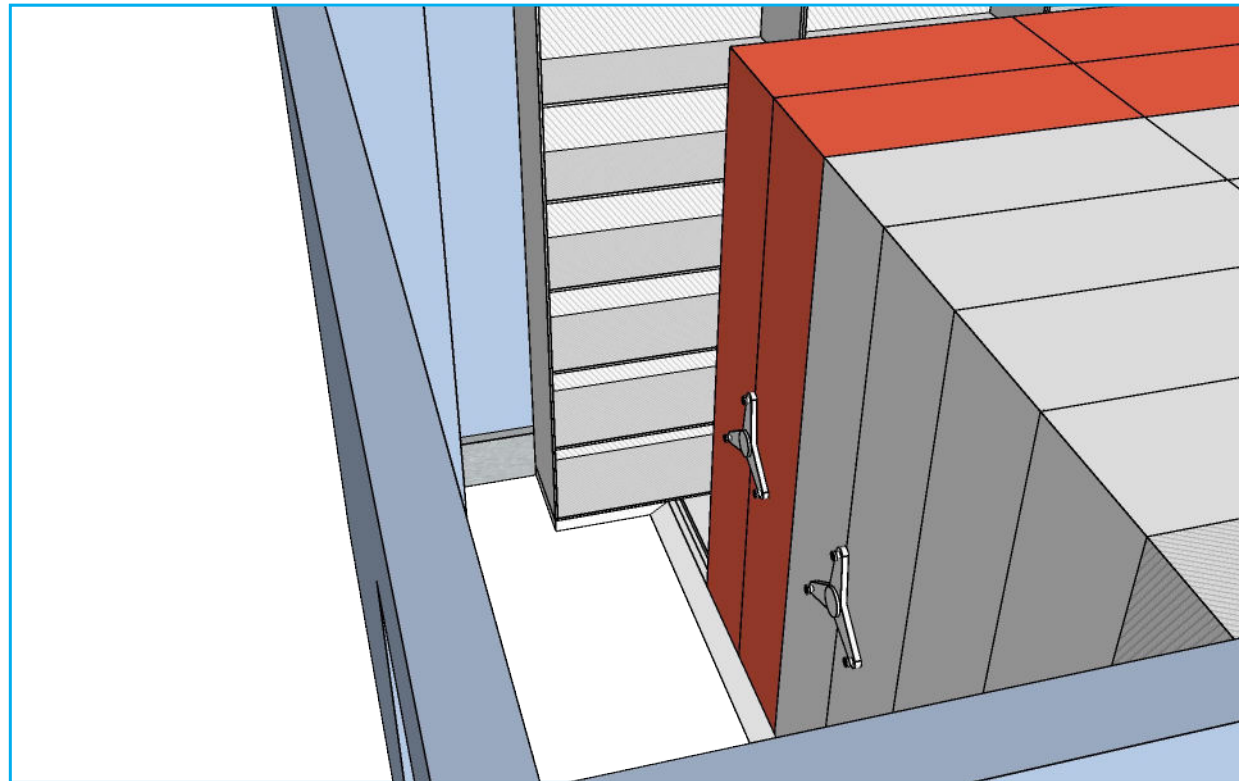
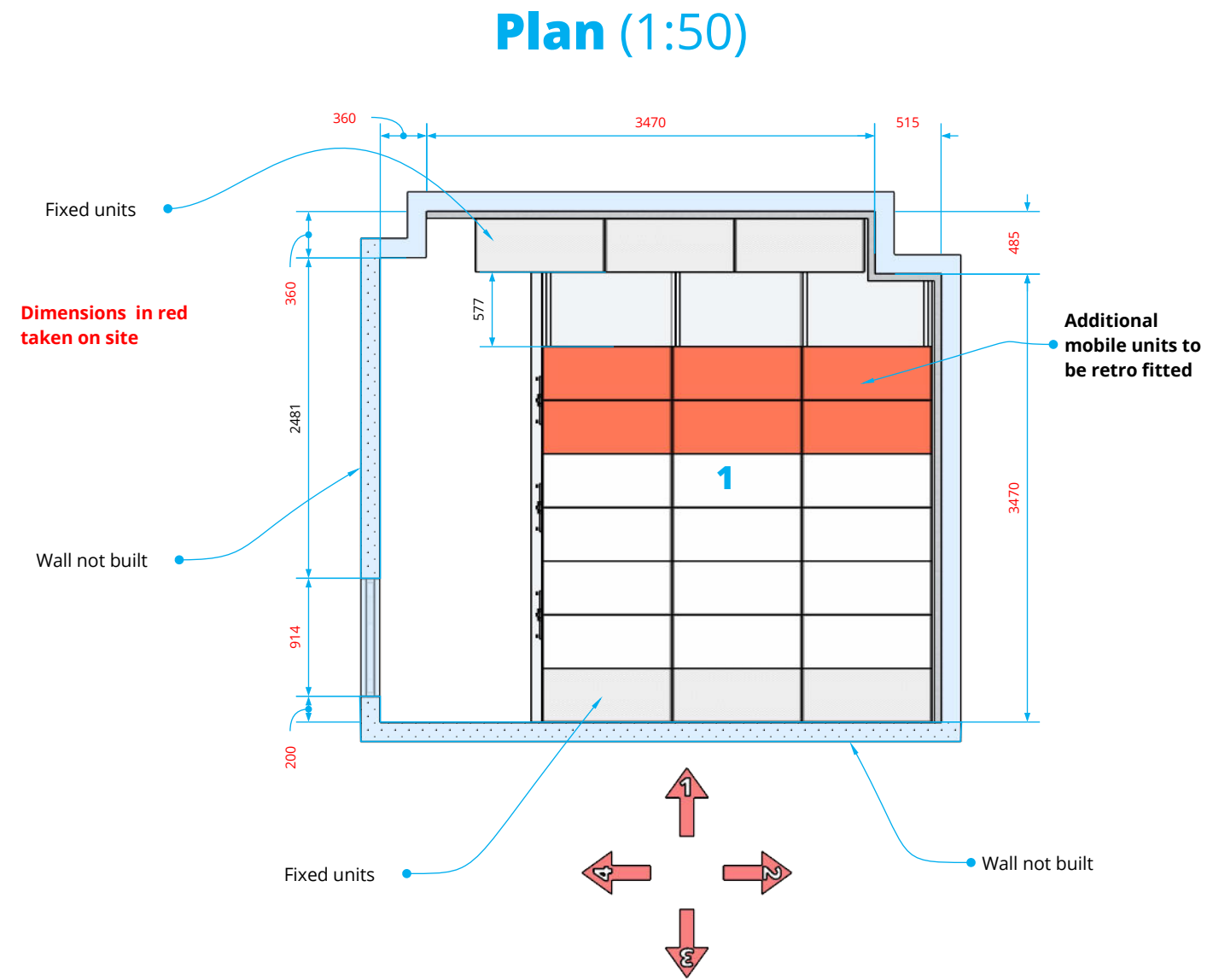
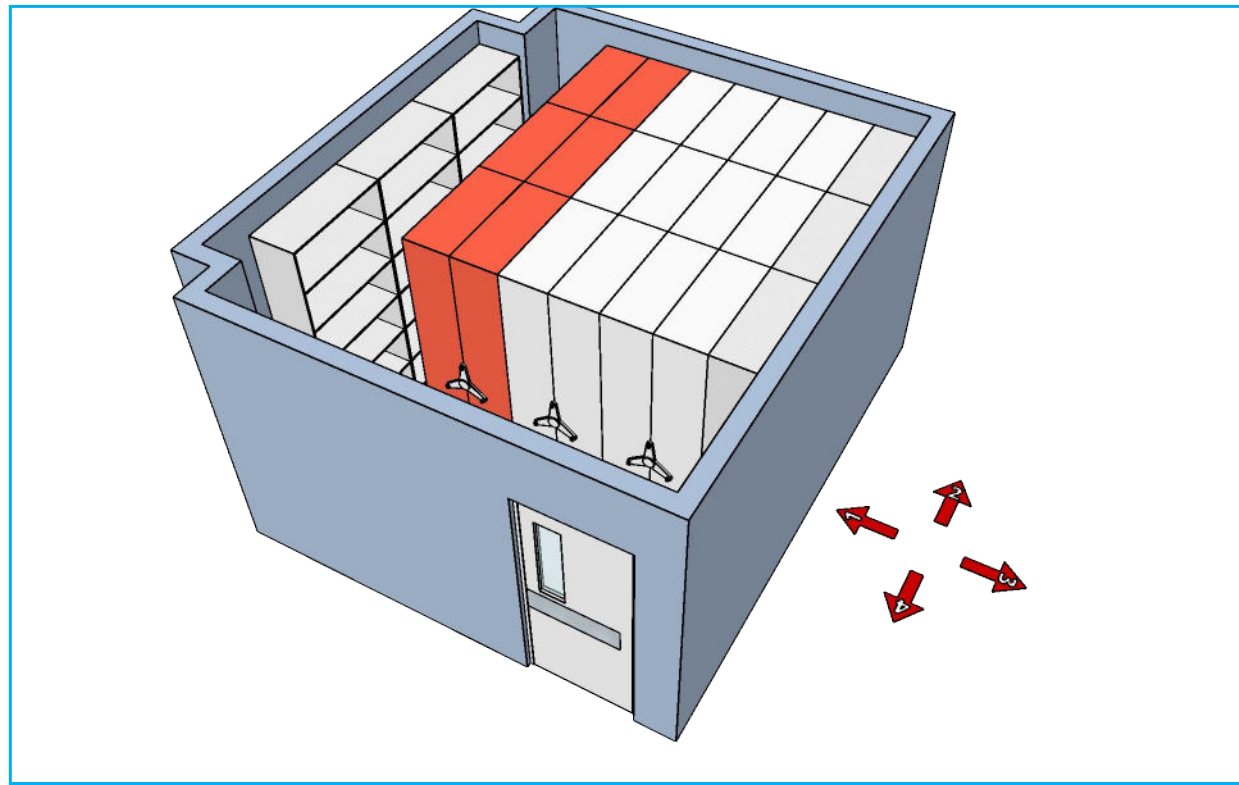
**Area:**  
 Roller Racking

**Contact:**

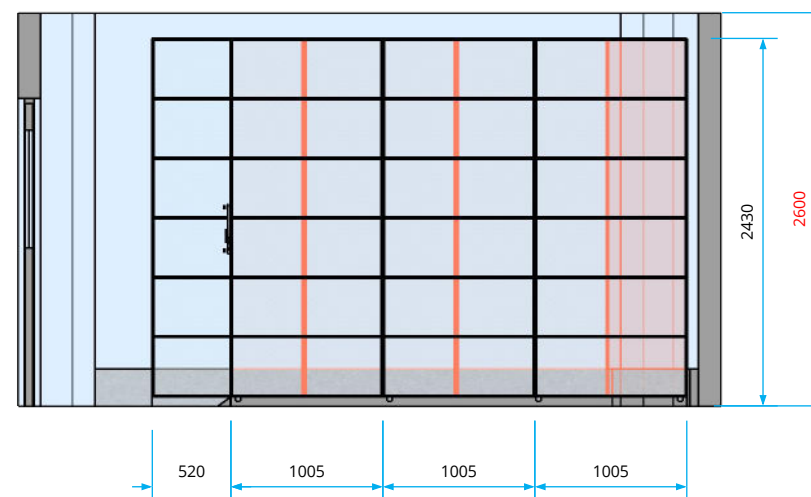
**Date:**  
 1-10-2019

**Drawing No:** MS05400      **Issue:** 5

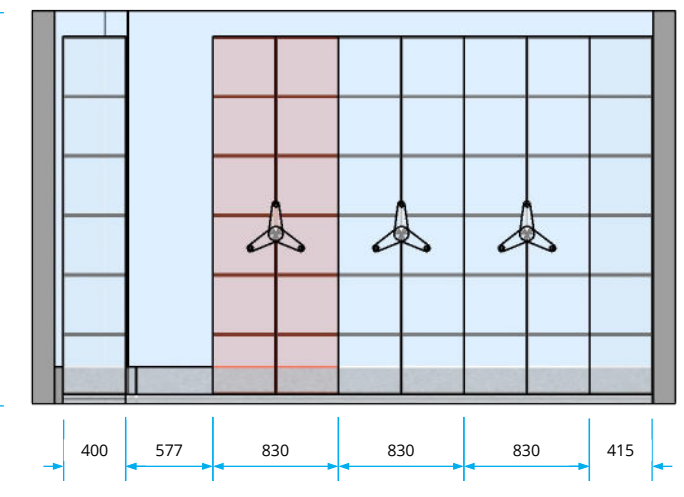
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### Elevation 1 (1:50)



### Elevation 2 (1:50)



Room to be cleared prior to installation.

REFERENCE	PART NO	DESCRIPTION	QTY	NOTES
1	RRACK	Roller racking shelving system	1	