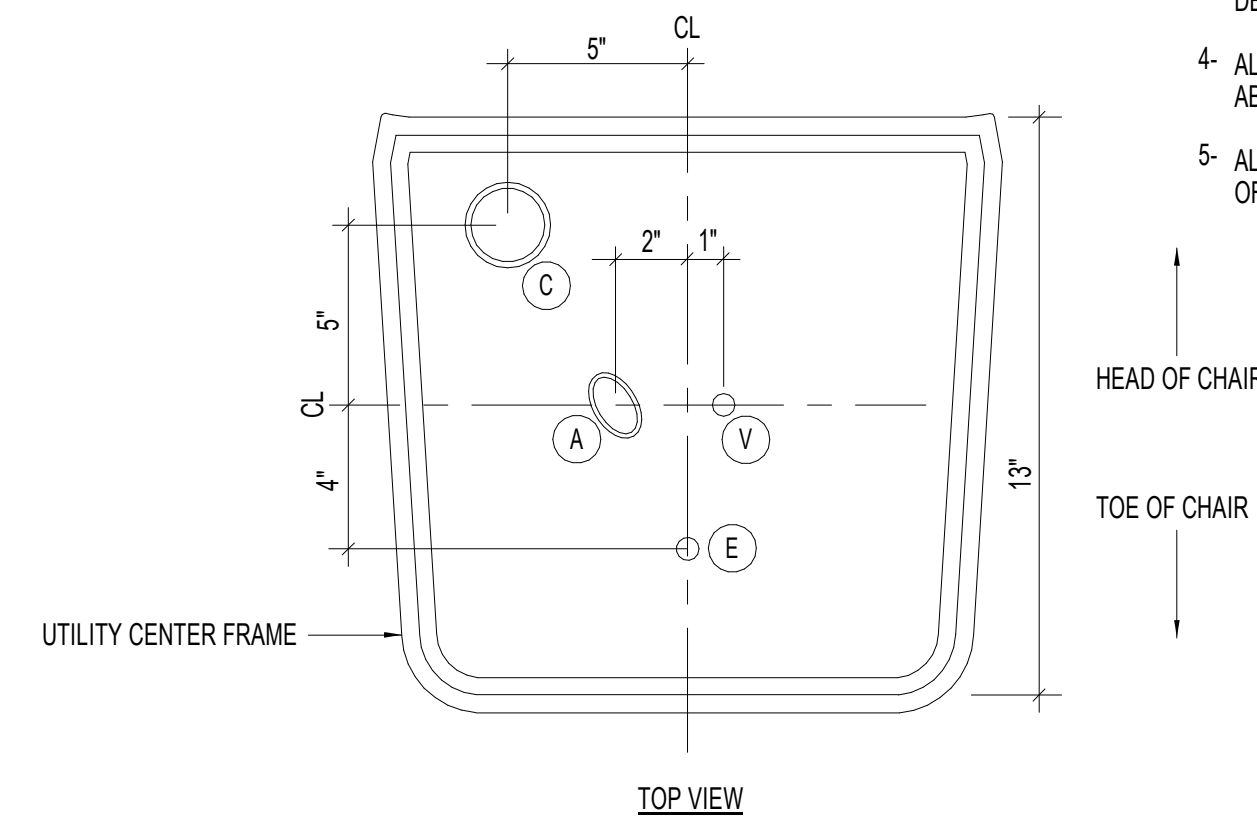


- (A) COMPRESSED AIR: 1/2" SUPPLY LINE FROM COMPRESSOR BY PLUMBING CONTRACTOR. STUB-UP 2" FROM FLOOR. TERMINATE WITH 3/8" ANGLE VALVE. MAXIMUM 100 PSI.
- (V) CENTRAL DENTAL VACUUM: 5/8" RISER BY PLUMBING CONTRACTOR. USE TYPE M COPPER. STUB-UP 2" FROM FLOOR. PROVIDE SHUT-OFF VALVE.
- (E) ELECTRICAL: TWO GANG BOX AND 115V QUAD OUTLET BY ELECTRICIAN.
- (C) CHASE: GRAY ELECTRICAL PVC PIPE CHASE WITH PULL-STRING BY ELECTRICIAN.

- 1- DETAIL PROVIDE FOR UTILITY REQUIREMENTS. REFER TO MANUFACTURER'S INSTALLATION GUIDE FOR ADDITIONAL INFORMATION. HENRY SCHEIN DENTAL EQUIPMENT SPECIALIST WILL PROVIDE INSTALLATION TEMPLATE UPON REQUEST.
- 2- INSTALLATION MUST CONFORM TO ALL LOCAL ELECTRICAL AND PLUMBING CODES.
- 3- ALL UTILITIES HEREIN TO BE SUPPLIED AND INSTALLED BY LICENSED CONTRACTORS. FINAL CONNECTIONS TO EQUIPMENT BY HENRY SCHEIN DENTAL.
- 4- ALL UTILITIES MUST BE NO HIGHER THAN 4-1/4" ABOVE FLOOR AT FINISH.
- 5- ALL PLUMBED SYSTEMS MUST BE FLUSHED CLEAN OF ANY DEBRIS PRIOR TO EQUIPMENT INSTALLATION.

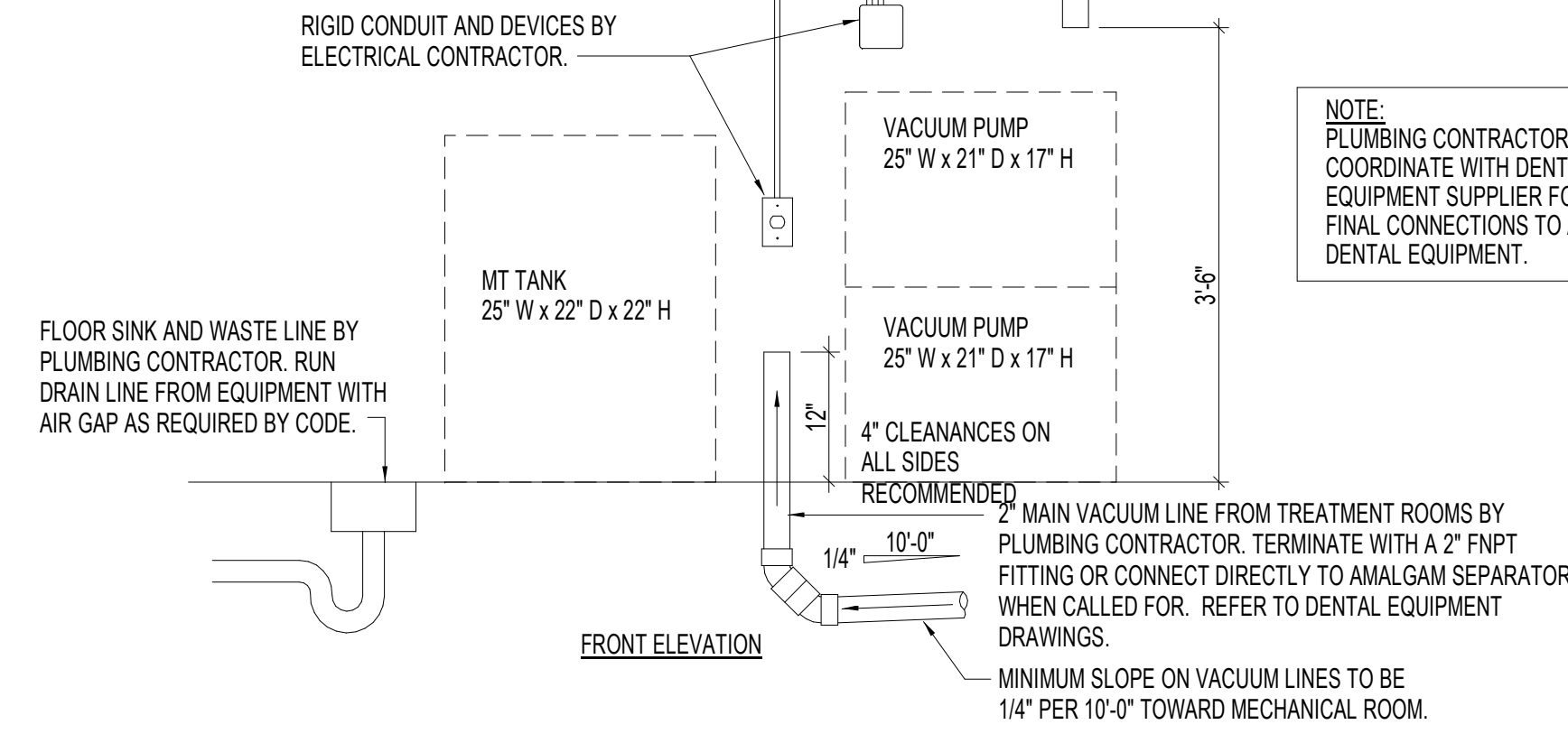


TOP VIEW

A DENTAL CHAIR UTILITIES DETAIL

NO SCALE

- 1- DETAIL PROVIDE FOR UTILITY REQUIREMENTS. REFER TO MANUFACTURER'S INSTALLATION GUIDE FOR ADDITIONAL INFORMATION.
- 2- INSTALLATION MUST CONFORM TO ALL LOCAL ELECTRICAL AND PLUMBING CODES.
- 3- FINAL CONNECTIONS TO BE MADE BY LICENSED DENTAL EQUIPMENT CONTRACTOR(S).
- 4- UTILITY ROOM MUST BE KEPT BETWEEN 40 - 104 DEG. F. PROVIDE THERMOSTAT CONTROLLED EXHAUST FAN AS SHOWN ON PLANS.

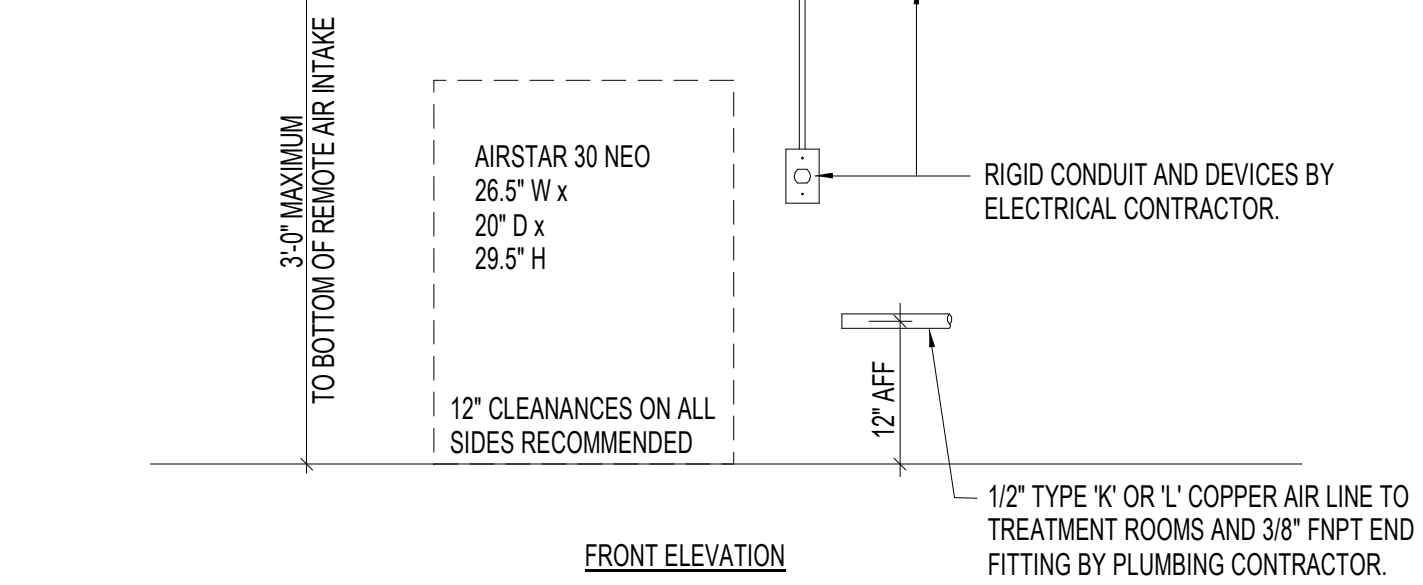


FRONT ELEVATION

B VACUUM PUMP DETAIL

NO SCALE

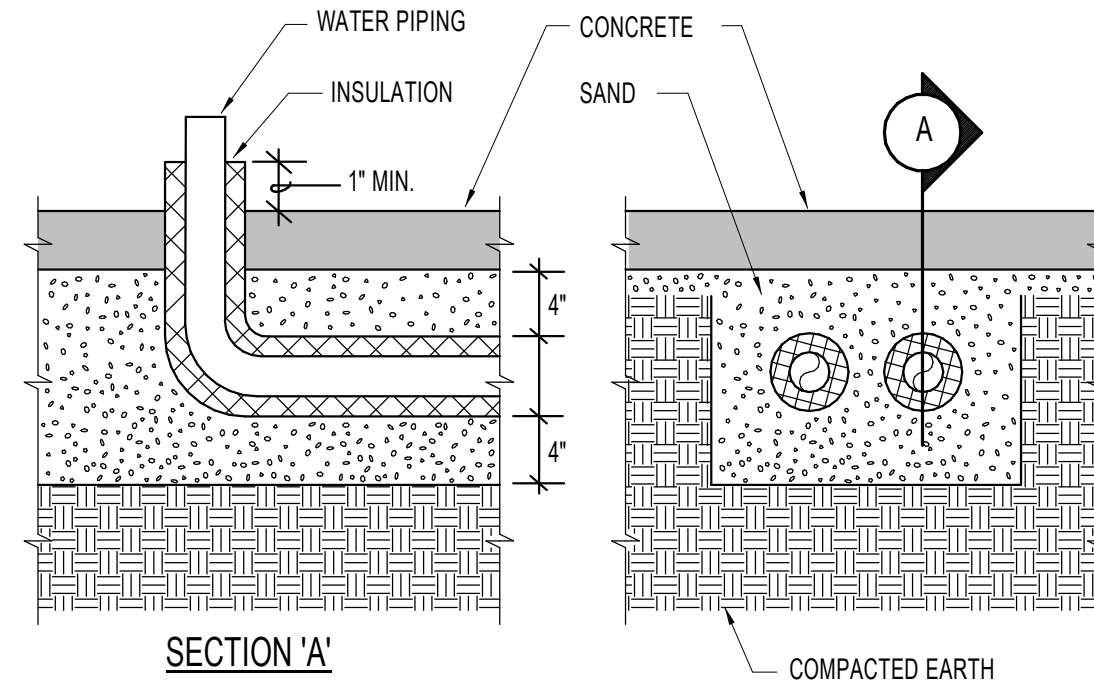
- 1- DETAIL PROVIDE FOR UTILITY REQUIREMENTS. REFER TO MANUFACTURER'S INSTALLATION GUIDE FOR ADDITIONAL INFORMATION.
- 2- INSTALLATION MUST CONFORM TO ALL LOCAL ELECTRICAL AND PLUMBING CODES.
- 3- FINAL CONNECTIONS TO BE MADE BY LICENSED DENTAL EQUIPMENT CONTRACTOR(S).
- 4- UTILITY ROOM MUST BE KEPT BETWEEN 41 - 105 DEG. F. PROVIDE THERMOSTAT CONTROLLED EXHAUST FAN AS SHOWN ON PLANS.
- 5- THIS COMPRESSOR IS DESIGNED AS A SUPPORT GAS SYSTEM TO DRIVE DENTAL TOOLS AND SUPPLY AIR DRIVEN EQUIPMENT AS DESCRIBED WITHIN NFPA 99. DENTAL AIR IS NOT A MEDICAL GAS.



FRONT ELEVATION

C AIR COMPRESSOR DETAIL

NO SCALE



NOTES:

- 1 - ALL WATER PIPING INSTALLED UNDERFLOOR SHALL BE TYPE "K" COPPER
- 2 - WATER PIPE INSULATION ON UNDERFLOOR PIPING SHALL BE ARMAFLEX 3/4" THICK RUBBER PIPE INSULATION. TAPE INSULATION AT ALL SEAMS.
- 3 - MINIMUM PIPE SIZE UNDERFLOOR SHALL BE 3/4"
- 4 - SAND FILL AROUND PIPING SHALL BE A MINIMUM OF 4" THICK. MATERIAL SHALL BE HAND TAMPED, RODDED OR LIGHTLY COMPACTED DURING INSTALLATION. CARE SHOULD BE TAKEN NOT TO DEFORM OR OTHERWISE DAMAGE PIPING OR INSULATION.

D UNDER SLAB PIPE INSULATION DETAIL

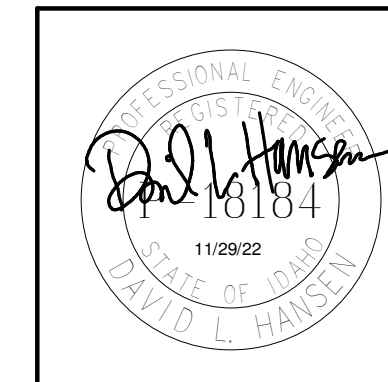
NO SCALE

DATE: 12/2/2022

DATE:

A NEW FACILITY FOR;
FAMILY HEALTH SERVICES
 SHOSHONE, IDAHO
PLUMBING DETAILS AND DIAGRAMS

Laughlin Ricks Architecture
 architecture/planning
 935 Shoshone Street North * Twin Falls, Idaho 83301
 (208) 736-8050 Fax: (208) 733-0950



Engineered Systems Associates
 1395 EAST CENTER
 POCAHELLO, IDAHO 83201
 PHONE: (208) 233-0501
 FAX: (208) 233-0529
 EMAIL: esa@engsystems.com
 ESA JOB NUMBER: 22042

DATE: 12/2/2022

MLJ DLH
 Drawn Checked

P3.2