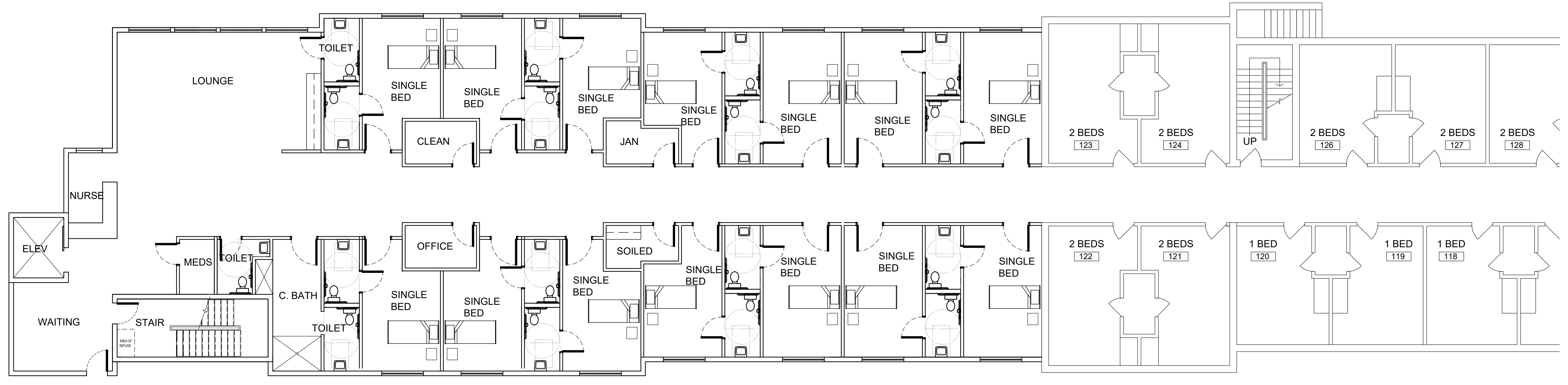
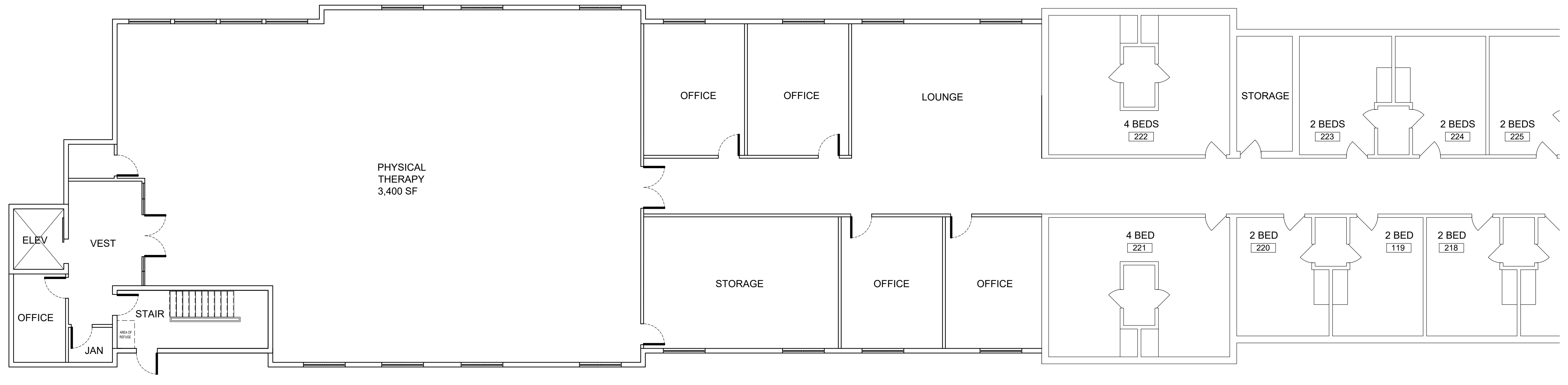


KEY PLAN
N.T.S.

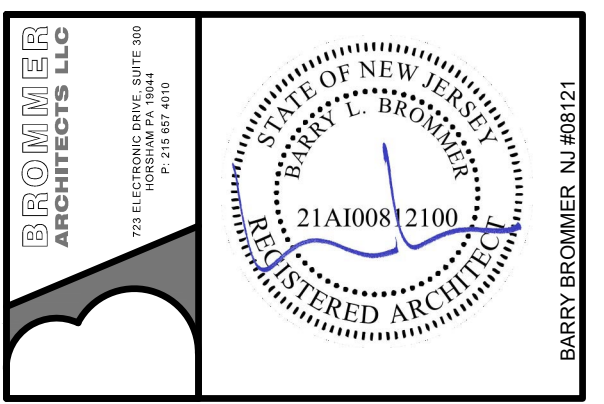


1 PROPOSED FIRST FLOOR ADDITION
1/8" = 1'-0"



2 PROPOSED SECOND FLOOR ADDITION
1/8" = 1'-0"

RESERVED FOR NJ DCA
DCA REF. NO. #####



ENGINEER
NAME
ADDRESS
PHONE
EMAIL

OWNER / CLIENT
NAME
ADDRESS
PHONE
EMAIL

BUILDING ADDITION AT
**ARBOR RIDGE REHABILITATION
& HEALTHCARE CENTER**
261 TERHUNE DR.
WAYNE, NJ 07470

| ISSUANCE: | | |
|-----------|---------------------|---------|
| MARKER | TITLE | DATE |
| | PLANNING SUBMISSION | 4.17.20 |
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| | | |
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| | | |
| | | |
| | | |

DATE: DATE
DRAWN BY: DRAWN BY
COMM. NO. COMM#

DRAWING TITLE:

**PROPOSED
FLOOR PLANS**

DRAWING NUMBER:

A101.1