Type of Event Fair/Festival Parade/March Walk or Run Concert/Performance TUP Sporting Event Other (specify) Event Name & Location Event Title Pumpkin Station Event Location (list all sites being requested) Westfield Plaza Bonita Event Times Set-I in Starts Date 9:00 am Date 9/29/23 Time 9:00 am Day of Week Friday	
Event Title Pumpkin Station Event Location (list all sites being requested) Westfield Plaza Bonita Event Times Set-Un Storts 16/23 Time 8:00 am Date Day of Week	
Set-I'm Storts a 16/23 Time 8:00 am Day of Week Wednesday	_
Date 9/29/23 Time Day of Week	ces Department
Event Starts Date 9/29/23 Time 9:00 am Day of Week Friday Event Ends Date 10/31/23 Time 9:00 pm Day of Week Tuesday 10 Breakdown Ends Date 11/5/23 Time 5:00 pm Day of Week Sunday 10	Neighborhood Services Department
Applicant Information Applicant (Your name) Norm Osborne Sponsoring Organization Event Coordinator (if different from applicant)	_
Mailing Address 10665 Brookview Lane, San Diego, CA. 92131 Day Phone 858-566-7466 After Hours Phone Cell 858-566-7466 F mail Nosborn1@san.rr.com	_

Applicant agrees to investigate, defend, indemnify and hold harmless the City, its officers, employees and agents from and against any and all loss, damage, liability, claims, demands, detriments, costs, charges, expense (including attorney's fees) and causes of action of any character which the City, its officers, employees and agents may incur, sustain or be subjected to on account of loss or damage to property or the loss of use thereof and for bodily injury to or death of any persons (including but not limited to the employees, subcontractors, agents and invitees of each party hereto) arising out of or in any way connected to the occupancy, enjoyment and use of any City premises under this agreement to the extent permitted by law.

Applicant understands this TUP/special event may implicate fees for City services, which will have to be paid in the City's Finance Department 48 hours prior to the event set-up. The undersigned also understands and accepts the City's refund policy for application processing and facility use and that fees and charges are adjusted annually and are subject to change.

Signature of Applicant:

Date 7.25.23

Special Event Application (continued) Please complete the following sections with as much detail as possible since fees and requirements are based on the information you provide us.

Fees/Proceeds/Reporting

Is your organization a "Tax Exempt, nonprofit" organization? Yes No Are admission, entry, vendor or participant fees required? Yes No If YES, please explain the purpose and provide amount (s):				
			\$_Estimated Gross Receipts including ticket, product and sponsorship sales from \$ ^{150,000} Estimated Expenses for this event.	this event.
			\$What is the projected amount of revenue that the Nonprofit Organizatio as a result of this event?	on will receive
Description of Event				
First time event Returning Event include site map with application				
Note that this description may be published in our City Public Special Events Calendar:				
Estimated Attendance				

Anticipated # of Spectators: Anticipated # of Participants: _

Requesting to close street(s) to vehic	cular traffic? Yes No 🖌	
List any streets requiring closure as a result of the event (provide map):		
_	Date and time of street reopening:	
Other (explain)		
Other (explain)		
Security and Crowd Control		
Depending on the number of participants	s, your event may require Police services. th Crowd Control and Internal Security: We use Westfield	
Depending on the number of participants Please describe your procedures for bot Security as needed. Have you hired Professional Security to		
Please describe your procedures for both Security as needed. Have you hired Professional Security to Yes No If YES, name and	th Crowd Control and Internal Security: We use Westfield	
Depending on the number of participants Please describe your procedures for both Security as needed. Have you hired Professional Security to Yes No C If YES, name and Security Director (Name): If using the services of a professional security provide a copy of its insurance certificate occurrence/\$2 Million dollars aggregate, of National City, its officers, employees, be provided by the vendor or its insurer	th Crowd Control and Internal Security: We use Westfield b handle security arrangements for this event? d address of Security Organization Phone: ecurity firm and the event will occur on City property, please e, evidencing liability with limits of at least \$1 Million dollars per , as well as and additional insured endorsement naming the City	
Depending on the number of participants Please describe your procedures for both Security as needed. Have you hired Professional Security to Yes No C If YES, name and Security Director (Name): If using the services of a professional security provide a copy of its insurance certificate occurrence/\$2 Million dollars aggregate, of National City, its officers, employees, be provided by the vendor or its insurer submission Is this a night event? Yes No	th Crowd Control and Internal Security: We use Westfield handle security arrangements for this event? d address of Security Organization Phone: ecurity firm and the event will occur on City property, please e, evidencing liability with limits of at least \$1 Million dollars per , as well as and additional insured endorsement naming the City and agents as additional insureds. Evidence of insurance must	

First Aid	
Depending on the station to be staffe	number of participants, your event may require specific First Aid services. First aid ad by event staff? Yes No First aid/CPR certified? Yes No
First aid station	n to be staffed by professional company. Company
property, please p Million dollars per endorsement nam insureds. Evidence	es of a professional medical organization/company and the event will occur on City rovide a copy of its insurance certificate, evidencing liability with limits of at least \$1 occurrence/\$2 Million dollars aggregate, as well as and additional insured ing the City of National City, its officers, employees, and agents as additional ce of insurance must be provided by the vendor or its insurer to the Neighborhood ent at the time of submission.
Accessibility	
Please describe y	our Accessibility Plan for access at your event by individuals with disabilities:
	cap Parking Spaces reserved at the entrance to the facility.

Elements of your Event
Setting up a stage? Yes No
Requesting City's PA system
Requesting City Stage; if yes, which size? Dimensions (13x28) Dimensions (20x28)
Applicant providing own stage (Dimensions)
Setting up canopies or tents?
of canopies size
3 # of tents size 20 X 40
No canopies/tents being set up

Setting up tables and chairs?			
Furnished by Applicant or Contra	ctor		
# of tables	No tables being set up		
# of chairs	No chairs being set up		
(For City Use Only) Sponsored E	vents – Does not apply to c	co-sponsored ever	nts
# of tables	No tables being set up		
# of chairs	No chairs being set up		
Contractor Name			
Contractor Contact Information	s	City/State	Phone Number
Setting up other equipment?			
Other (explain)			
Not setting up any equipment listed above at event			
Having amplified sound and/or m	usic? Yes No 🖌		
PA System for announcements	CD player or DJ	music	
Live Music Small 4-5 piece live band Large 6+ piece live band			
Other (explain)			
If using live music or a DJ. Contractor Name			
Address	City/S	Nate	Phone Number
7001622	City/S		

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Using lighting equipment at your event? Yes No
Bringing in own lighting equipment
Using professional lighting company Company Name
Address City/State Phone Number
Using electrical power? Yes No Using Kimball Park Bowl Lighting (fromto)
Using on-site electricity For sound and/or lighting For food and/or refrigeration
Bringing in generator(s) For sound and/or lighting For food and/or refrigeration
Vendor Information PLEASE NOTE: You may be required to apply for a temporary health permit if food or beverages are sold of given away during your special event. Also see 'Permits and Compliance' on page 8 in the Special Event Guide. For additional information on obtaining a temporary health permit,
please contact the County of San Diego Environmental Health at (619) 338-2363. Having food and non-alcoholic beverages at your event? Yes No ✓ Vendors preparing food on-site ► # ► Business License # If yes, please describe how food will be served and/or prepared:
If you intend to cook food in the event area please specify the method: GAS ELECTRIC CHARCOAL OTHER (Specify): Vendors bringing pre-packaged food ▶ # ▶ Business License #
Vendors bringing bottled, non-alcoholic beverages (i.e., bottled water, can soda, etc.) > #
Vendors selling food # Business License #(s)
Vendors selling merchandise # Business License #(s)
Food/beverages to be handled by organization; no outside vendors
Vendors selling services # Business License #(s)
Explain services
Vendors passing out information only (no business license needed) #
Explain type(s) of information
No selling or informational vendors at event

Having children activities? Ye	es 🗸	No
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PLEASE NOTE: In the event inflatable jumps are provided at the event, The City of National City requires commercial liability insurance with limits of at least \$1 Million dollars per occurrence/\$2 Million dollars aggregate. In addition, the City of National City must be named as an Additional Insured pursuant to a separate endorsement, which shall be provided by the vendor or its insurer to the City's Risk Manager, along with the Certificate of Insurance, for approval prior to the event. The application should be filed out at least one week prior to the event. For questions or to obtain a copy of the "Facility Use Application", please contact the Engineering/Public Works Department at (619) 336-4580.

Inflatable bouncer house #	Rock climbing wall Height
Inflatable bouncer slide # 3	Arts & crafts (i.e., craft making, face painting, etc.)
Carnival Rides	Other
Having fireworks or aerial display	? Yes No
Dimensions	Duration
Number of shells	Max. size
National City requires commercial lia occurrence/ \$4 Million dollars aggreg Additional Insured pursuant to a sep insurer to the City's Risk Manager, a event. Depending on the size and/o	orks or another aerial display is planned for your event, The City of ability insurance with limits of at least \$2 Million dollars per gate. In addition, the City of National City must be named as an arate endorsement, which shall be provided by the vendor or its along with the Certificate of Insurance, for approval prior to the r nature of the fireworks display, the City reserves the right to endor must also obtain a fireworks permit from the National City

Arranging for media coverage? Yes No

Yes, but media will not require special set-up

Fire Department and the cost is \$602.00

Yes, media will require special set-up. Describe

Event Signage

PLEASE NOTE: For City sponsored or co-sponsored events, banners publicizing the event may be placed on the existing poles on the 1800 block and 3100 block of National City Boulevard. The banners must be made to the City's specifications. Please refer to the City's Special Event Guidebook and Fee Schedule for additional information.

Are you planning to have signage at your event? Yes 🗹 No
Yes, we will post signage # Dimensions
Yes, having inflatable signage # (complete Inflatable Signage Request form)
Yes, we will have banners #
What will signs/banners say?
How will signs/banners be anchored or mounted?
Location of banners/signage
Waste Management
PLEASE NOTE: One toilet for every 250 people is required, unless the applicant can show that there are sufficient facilities in the immediate area available to the public during the event.
Are you planning to provide portable restrooms at the event? Yes No
If yes, please identify the following:
► Total number of portable toilets:
Total number of ADA accessible portable toilets: 1
Contracting with portable toilet vendor.
Company Phone Load-in Day & Time Load-out Day & Time
Portable toilets to be serviced. Time Daily
Set-up, Breakdown, Clean-up
Setting up the day before the event?
Yes, will set up the day before the event.
No, set-up will occur on the event day
Requesting vehicle access onto the turf?
Yes, requesting access onto turf for set-up and breakdown (complete attached Vehicle Access Request form)
No, vehicles will load/unload from nearby street or parking lot.

NPDES-Litter Fence
City to install litter fence
Applicant to install litter fence
✓N/A
Breaking down set-up the day after the event?
Yes, breakdown will be the day after the event. # of breakdown day(s)
No, breakdown will occur on the event day.
How are you handling clean-up?
Using City crews
Using volunteer clean-up crew during and after event.
Using professional cleaning company during and after event.
Miscellaneous
Please list anything important about your event not already asked on this application:

Please make a copy of this application for your records. We do not provide copies.



Special Events Pre-Event Storm Water Compliance Checklist

I. Special Event Information

Name of Special Event: Pumpkin Station	
Event Address: 3030 Plaza Bonita Road	Expected # of Attendees:
Event Host/Coordinator: Michael Osborne	Phone Number: 858-688-1701

II. Storm Water Best Management Practices (BMPs) Review

	YES	NO	N/A
Will enough trash cans provided for the event? Provide number of trash bins: <u>8</u>	~		
Will enough recycling bins provided for the event? Provide number of recycle bins: 2	~		
Will all portable toilets have secondary containment trays? (exceptions for ADA compliant portable toilets)	1		
Do all storm drains have screens to temporarily protect trash and debris from entering?	~		
Are spill cleanup kits readily available at designated spots?	1		

* A Post-Event Storm Water Compliance Checklist will be completed by City Staff.

City of National City

PUBLIC PROPERTY USE HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

Persons requesting use of City property, facilities or personnel are required to provide a minimum of \$1,000,000 combined single limit insurance for bodily injury and property damage which includes the City, its officials, agents and employees named as additional insured and to sign the Hold Harmless Agreement. Certificate of insurance must be attached to this permit. The insurance company issuing the insurance policy must have a A.M. Best's Guide Rating of A:VII and that the insurance company is a California admitted company; if not, then the insurance policy to the issuance of the permit for the event. The Certificate Holder must reflect:

City of National City Risk Management Department 1243 National City Boulevard National City, CA 91950

Organization: _____ Pinery Christmas Trees, Inc. DBA Pumpkin Station

Person in Charge of Activity: Michael Osborne

Address: _____ 10665 Brookview Lane, San Diego, CA. 92131

Telephone: 858-688-1701

Date(s) of Use:

HOLD HARMLESS AGREEMENT

As a condition of the issuance of a temporary use permit to conduct its activities on public or private property, the undersigned hereby agree(s) to defend, indemnify and hold harmless the City of National City and the Parking Authority and its officers, employees and agents from and against any and all claims, demands, costs, losses, liability or, for any personal injury, death or property damage, or both, or any litigation and other liability, including attorney's fees and the costs of litigation, arising out of or related to the use of public property or the activity taken under the permit by the permittee or its agents, employees an contractors.

fficial Title: OWNAR PERSIDEN	Date: 7.25.23
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City of Nation		NATIONAL CITY	2023		
	National City, California Only"	LUJV INCORPORATED	TO BE POSTED IN A CONSPICUOUS PLACE AND NOT TRANSFERABLE OR ASSIGNABLE		
Business Name	PUMPKIN STATION	Business Type	Special Event		
Business Location Business Owner(s)	2979 PLAZA BONITA RD NATIONAL CITY, CA 91950-8023 NORMAN (PRES) OSBORNE	Account Number Effective Date	09003608 September 29, 2023 December 31, 2023		
PUMPKIN STAT PO BOX 26070 SAN DIEGO, CA	92196-0118	CERTIFICATE WHET RENEWAL NOTICE For all inquiries regard	City Manager BLIGATION TO RENEW THIS HER OR NOT YOU RECEIVE A ding this certificate, contact HdL t Center at (619) 382-2596.		

PUMPKIN STATION

Thank you for your payment on your National City Business Tax Certificate. ALL CERTIFICATES MUST BE AVAILABLE FOR INSPECTION UPON REQUEST. If you have questions concerning your business license, contact the Business Support Center via email at: NationalCity@HdLgov.com or by telephone at: (619) 382-2596

Keep this portion for your license separate in case you need a replacement for any lost, stolen, or destroyed license. A fee may be charged for a replacement or duplicate certificate.

This certificate does not entitle the holder to conduct business before complying with all requirements of the National City Municipal code and other applicable laws, nor to conduct business in a zone where conducting such business violates law.

If you have a fixed place of business within the National City, please display the Business Tax Certificate below in a conspicuous place at he premises. Otherwise, every Business Tax Certificate holder not having a fixed place of business in the City shall keep the Business Tax Certificate upon his or her person, or affixed in plain view any cart, vehicle, van or other movable structure or device at all times if required by the Collector.

Starting January 1, 2021, Assembly Bill 1607 requires the prevention of gender-based discrimination of business establishments. A full notice is available in English or other languages by going to: https://www.dca.ca.gov/publications/



BUSINESS TAX SUPPORT CENTER TIONAL CITY 8839 N CEDAR AVE #212 FRESNO, CA 93720-1832





PINERY CHRISTMAS TREE COMPANY PUMPKIN STATION PO BOX 26070 SAN DIEGO, CA 92196-0118

Account Number:

09003608

Date of Issue:

09/29/2023

July 18, 2023

City of National City Attention: Vianey Rivera Neighborhood Service Division 1243 National City Boulevard National City, California 91950-4301

Re: Temporary Use Permit Pumpkin Station (Pinery Christmas Trees, Inc.)- Westfield Plaza Bonita

To whom it may concern:

I hereby authorize Norm Osborne, acting as representative of Pinery Christmas Trees, Inc. to operate a business known as Pumpkin Station in parking lot #7 at Westfield Plaza Bonita during the dates of September 5, 2023 - November 5, 2023.

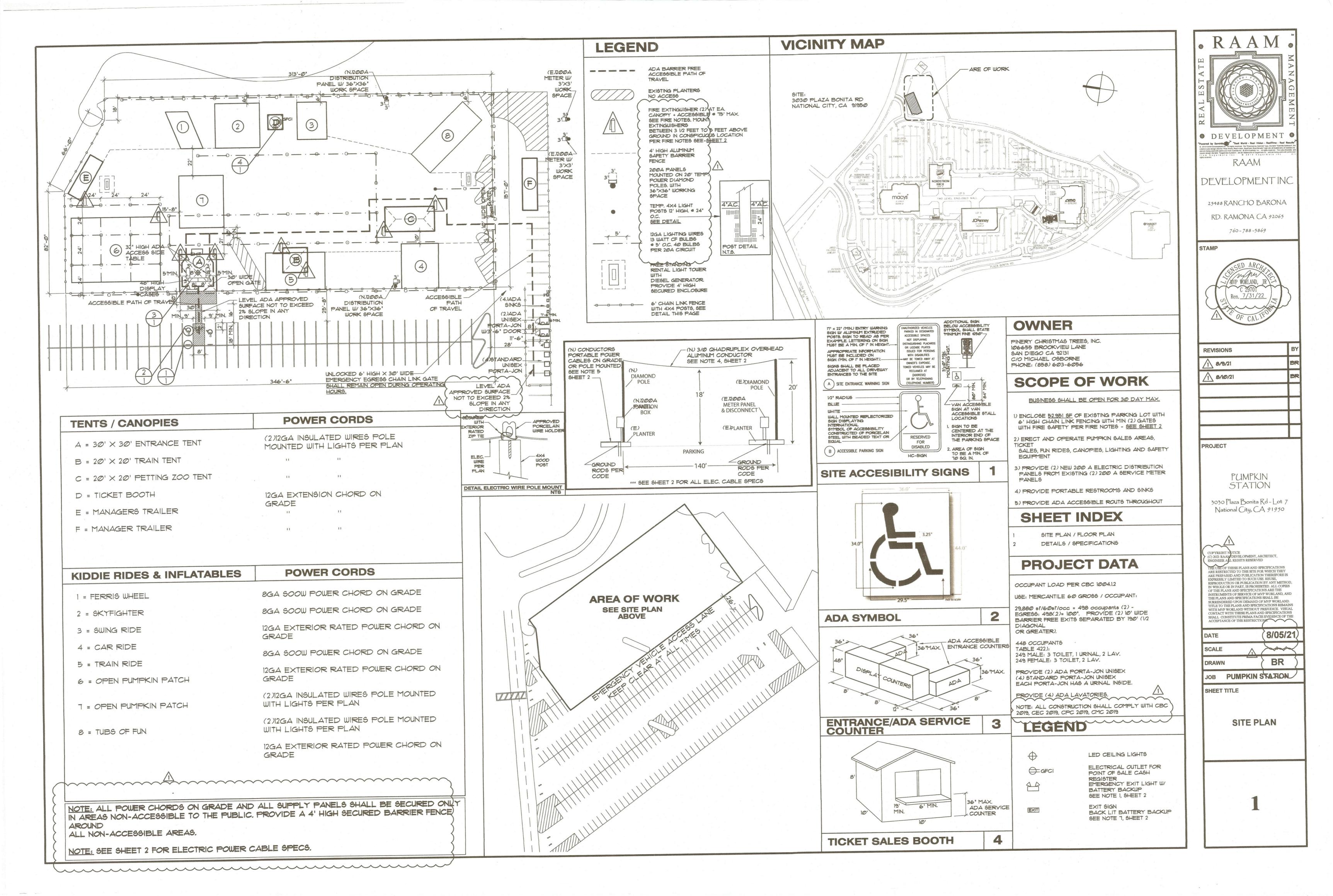
Norm Osborne has permission to install temporary power to poles in parking lot #7 to provide power during the temporary use time if adequate power is not already in place.

Norm Osborne will obtain all necessary permits from National City for occupancy at Westfield Plaza Bonita.

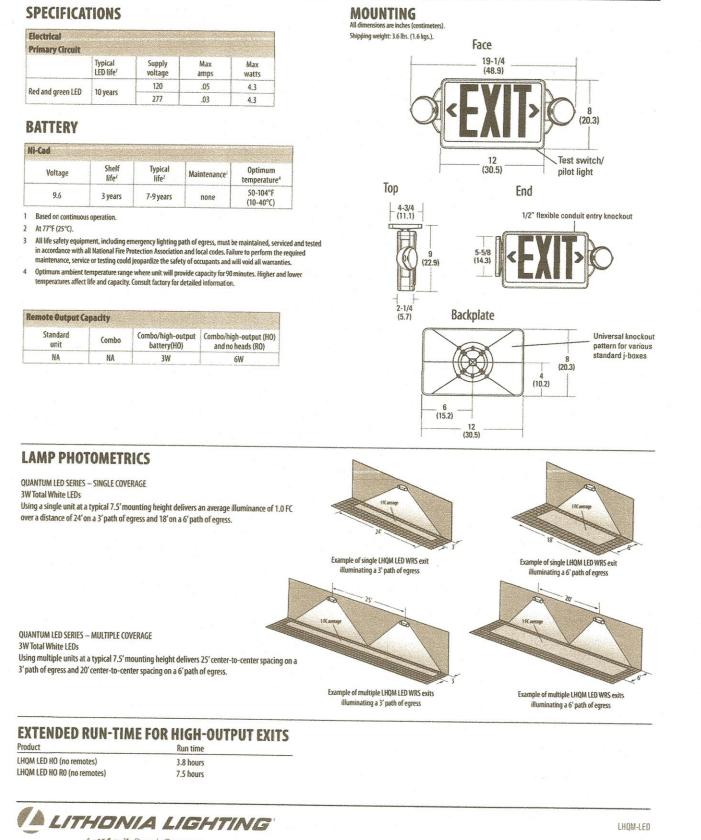
Please feel free to call me if you have any questions at 619.267.2850.

Thank you, General Manager



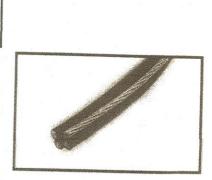


LHQM LED QUANTUM® Exit/Unit Combo



An **Acuity**Brands Company EMERGENCY: One Lithonia Way Convers, GA 30012 Phone: 800-334-8694 Fax: 770-981-8141 www.lithonia.com © 2012-2016 Acuity Brands Lighting, Inc. All rights reserved. Rev. 03/01/16





Quadruplex Overhead Aluminum Conductor

	Code Word	Ph	ase Conduc	tors	Bare I	Neutral Mes	senger		os.) per 1000 ft.	Ampaci	ty (Amps)
		Size AWG	Strand	Insulation Thickness (mils)	Size AWG	*Strand	Breaking Strength (lbs.)	XLP	Poly	XLP	Poly
	Morchuca	6	Solid	45	6	6/1	1,190	152	147	75	60
	Chola	6	7/W	45	6	6/1	1,190	162	151	75	60
	Morgan	4	Solid	45	4	6/1	1,860	226	220	100	80
	Hackney	4	7/W	45	4	6/1	1,860	241	226	100	80
	Palomino	2	7/W	45	2	6/1	2,850	362	342	135	105
	Costena	1/0	19/W	60	1/0	6/1	4,380	575	550	133	135
	Grullo	2/0	19/W	60	2/0	6/1	5,310	707	678	205	155
>	Suffolk	3/0	19/W	60	3/0	6/1	6,620	872	838		
	Appaloosa	4/0	19/W	60	4/0	6/1	8,350	1079	1,039	235	180
ſ	Bronco	336.4	19/W	80	336.4	18/1	8,580	1613	1,568	270	205
Ī	Gelding	336.4	19/W	80	4/0	6/1	8,350	1548		330	240
ľ	Hurricane	500	37/w	80	336.4	26/7	8,580	2196	1,494 2,186	330 458	240 398

All values are nominal and subject to correction Designated sizes are ACSR 6/1 diameter equivalent resistivity per ASTM-B-399 for 6201. Conductor temperature of 90°C for XLP, 75°C for Poly; ambient temperature of 40°C emissivity 0.9; 2ft/sec. Wind in sun. Application: Aluminum Quadruplex Overhead cable is designed for use to supply 3 phase power, usually from a pole mounted

transformer, to the consumer weather head, where the connection to the service entrance cable is made. For service at 600 volts or lower (phase to phase) at a conductor temperature of 75°C maximum. Conductors: Aluminum Quadruplex Overhead cable has a concentric strand or compressed 1350-H19 series aluminum conductor.

Aluminum Quadruplex Overhead cable has a bare ACSR messenger. Optional constructions include a messenger of Messenger AAC or 6201 alloy.

Insulation:

Aluminum Quadruplex Overhead cable has a black cross linked polyethylene (XLP) insulation. Polyethylene (PE) insulation available upon request. ASTM B-230

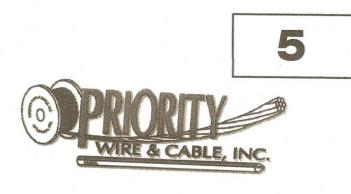
Standards:

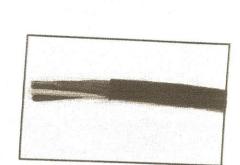
ASTM B-232 ASTM B-399 ICEA S -76 - 474

ASTM B-231

1-800-945-5542







8ga-2ga SOOW Portable Power Cable - 90°C 600V

		Size No. of AWG Conductors		Nominal Insulation Thickness		Nominal Overall Diameter		Current	Weight
		Strand	inches	mm	inches	mm	Amps	lbs./M	
500W-8/3	8	3	133/29	0.060	1.52	0.720	21.72		
SOOW-8/4	8	4	133/29	0.060	1.52	0.780	and the second s	40	491
500W-8/5	8	5	133/29	0.060	1.52	1	24.64	35	640
SOOW-6/3	6	3	133/27	0.060		0.860	27.30	28	690
SOOW-6/4	6	4	133/27		1.52	0.800	24.89	55	695
SOOW-6/5	6			0.060	1.52	0.890	27.69	45	850
500W-4/3		5	133/27	0.060	1.52	0.945	31.12	36	930
The factor of the local division of the loca	4	3	133/25	0.060	1.52	0.940	28.96	70	950
500W-4/4	4	4	133/25	0.060	1.52	1.010	32.00	60	
SOOW-4/5	4	5	133/25	0.060	1.52	1.135	36.07		1100
SOOW-2/3	2	3	133/23	0.060	1.52	1.090		48	1160
500W-2/4	2	4	133/23	0.060	1.52		33.73	80	1310
SOOW-2/5	2	5	133/23	0.060	And a state of the	1.170	37.08	80	1590
All values are	e nominal and own are for cu s NOT counte	subject to correct	ation		1.52	1.435	40.89	65	1890

Application: SOOW Portable Power Cable is for use with portable tools, equipment, appliances, small motors and associated machinery where flexibility and durability are required.

Conductors: SOOW Portable Power Cable has a stranded soft drawn bare copper conductor per ASTM B3 and B174.

SOOW Portable Power Cable has premium grade color coded ethylene propylene diene monomer EPDM insulation. Insulation: For color code, see table K in technical section.

SOOW Portable Power Cable has an overall jacket of black chlorinated polyethylene CPE, which is oil, moisture, sunlight, water and abrasion resistant.

Standards:

Jacket:

MSHA approved Federal Specification JC - 580

OSHA accepted



1-800-945-5542 © Priority Wire & Cable, Little Rock, AR PWC-2013

FIRE NOTES

THE FOLLOWING CITY OF NATIONAL CITY FIRE DEPARTMENT STIPULATIONS AND REQUIREMENTS FOR THIS ONGOING EVENT SHALL BE PROVIDED BY, AND ARE THE SOLE RESPONSIBILITY OF, THE EVENT ORGANIZER/EVENT MANAGEMENT.

1) EMERGENCY VEHICLE ACCESS to the area shall be maintained at all times.

2) Fire department access into and through the booth areas are to be maintained at all times. Fire apparatus access roads shall have an unobstructed width of not less than 20 feet and an unobstructed vertical clearance of not less than 13'6'.

3) Participants on foot are to move immediately to the sidewalk upon approach of emergency vehicles.

4) Vehicles in roadway are to move immediately to the right upon approach of emergency vehicles.

5) Fire hydrants in Fire Department connections shall not be blocked or obstructed at any time.

6) Exit to be maintained in an unobstructed manner at all times. Exit way to be clear of all obstructions.

7) Exits to be posted -EXIT.

8) No open flames or smoking inside or adjacent to the tent/canopy. Signs to be posted -NO SMOKING.

9) Extinguishers to be mounted in a visible location between 3 1/2 feet to 5 feet from the floor to the top of the extinguisher. Maximum travel distance from an extinguisher shall not be more than 75 feet travel distance. All extinguishers to have a current state fire marshal tag attached. Extinguishers shall be mounted in a conspicuous area inside tent or canopy.

12) Automobiles and other internal combustion engines shall be a minimum distance of 20 feet from all tents and canopies.

13) Any electrical power cord used is to be properly grounded and approved by the building official. Extension cords shall be used as "temporary wiring" only.

14) Internal combustion power sources that may be used for light towers shall be of adequate capacity to permit uninterrupted operation during normal operating hours.

15) Internal combustion power sources shall be isolated from contact with the public by either physical guards, fencing, or an enclosure.

16) If tents or canopies are used, tents having an area in excess of 200 ft.2 or canoples in excess of 400 ft.2 or multiple tents and/or canoples placed together equaling or greater than the above stated areas, are to be used, they shall be flame retardant treated with an approved State Fire Marshal Seal attached. A 10 feet separation distance must be maintained between tents and canopies. A permit from the Fire Department must be obtained. Cooking shall not be permitted under tents or canopies unless the tents or canopies meet State Fire Marshal approval for cooking. Certificate of State Fire Marshal flame spread shall be provided to the National City Fire Department if applicable.

17) Bales of Straw and Corn Stalks shall meet the requirements for Flame Propagation and Flame Spread. Proof of product used shall be furnished to the National City Fire Department prior to opening day. An inspection and test on materials used will be required prior to opening day.

18) A Fire Safety Inspection is to be conducted by the Fire Department prior to operations of the carnival to include all rides, cooking areas, game booths, etc.

18) Fees can only be waived by city Council.

19) First aid shall be provided by the organization conducting this event.

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