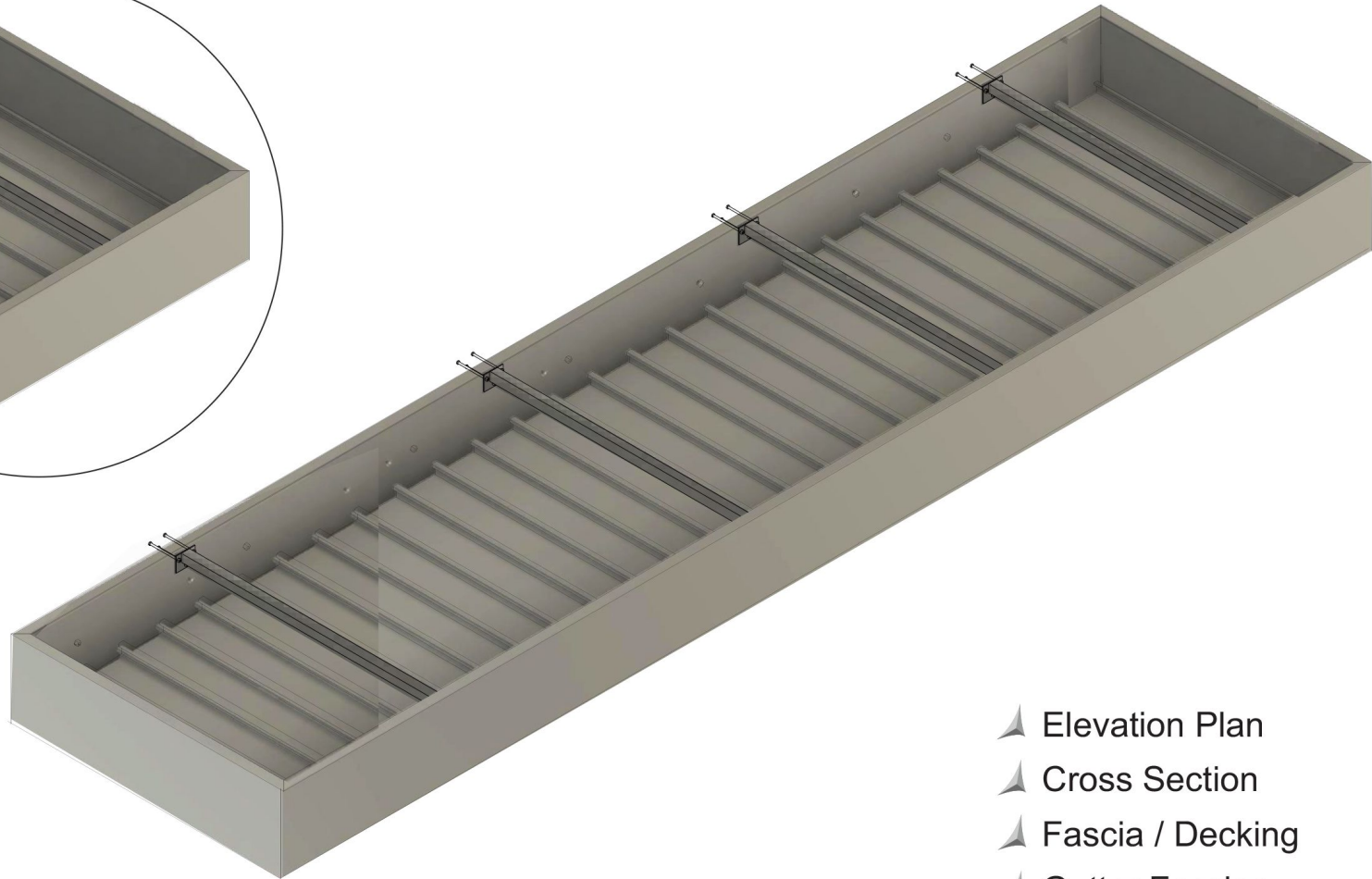
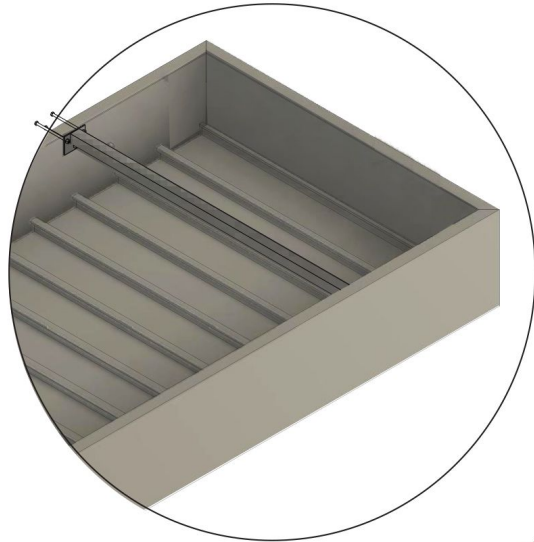


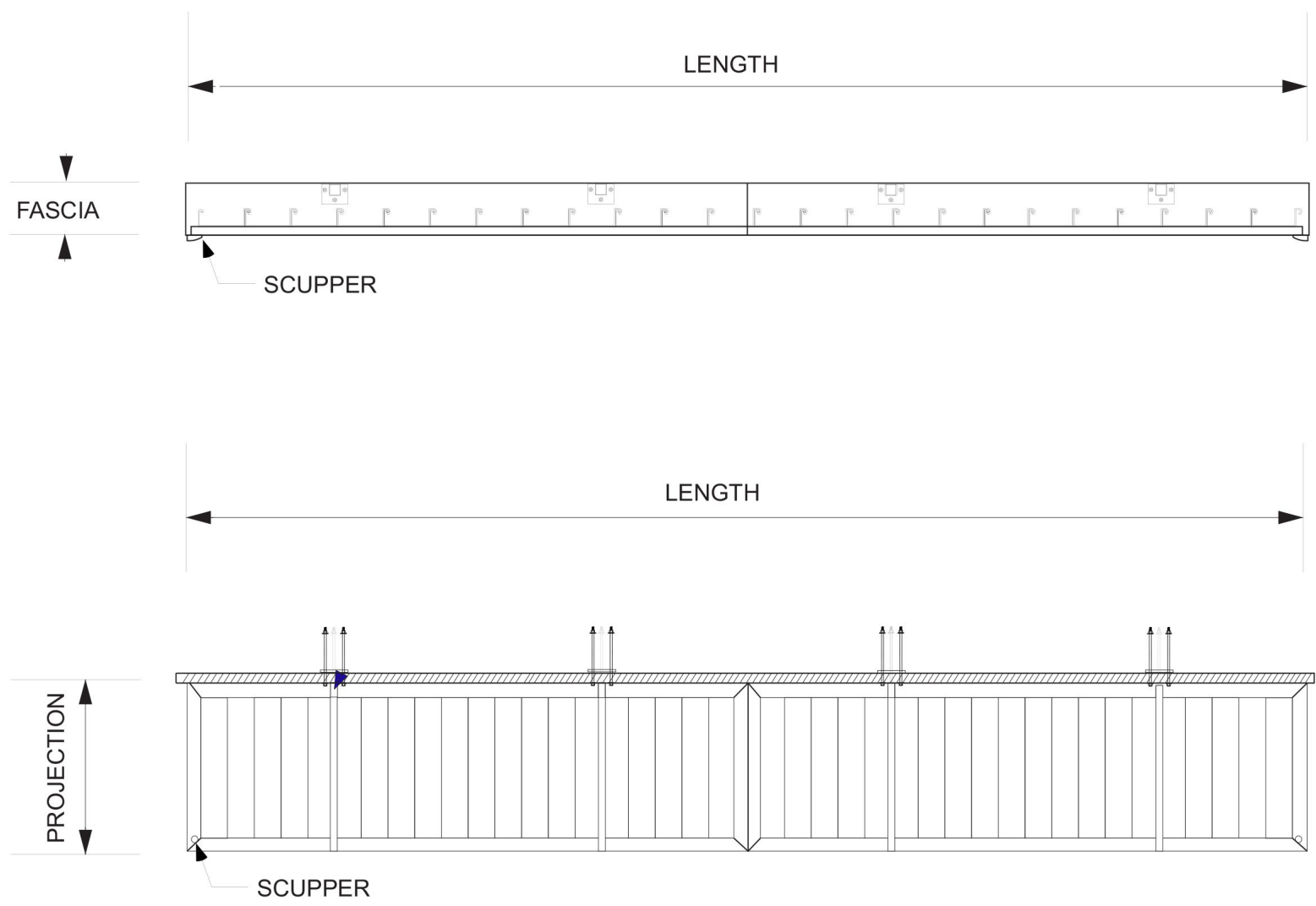
COLUMBUS AWNING CANTILEVERED CANOPY SYSTEM



- ▲ Elevation Plan
- ▲ Cross Section
- ▲ Fascia / Decking
- ▲ Gutter Fascias
- ▲ Components
- ▲ Wall Attachments

PROJECT: _____ LOCATION: _____	DATE: _____ DESIGNER: _____	CANOPY TYPE DETAILS _____ _____	APPROVED <input type="checkbox"/> APPROVED WITH CORRECTIONS <input type="checkbox"/> NOT APPROVED RESUBMIT <input type="checkbox"/>
PROJECT MANAGER: _____ PROPOSED: _____	ENGINEER: _____ FILE FOLDER: _____ PAGE OF _____	_____ _____	SIGNATURE: _____

CANTILEVERED CANOPY
ELEVATION PLAN

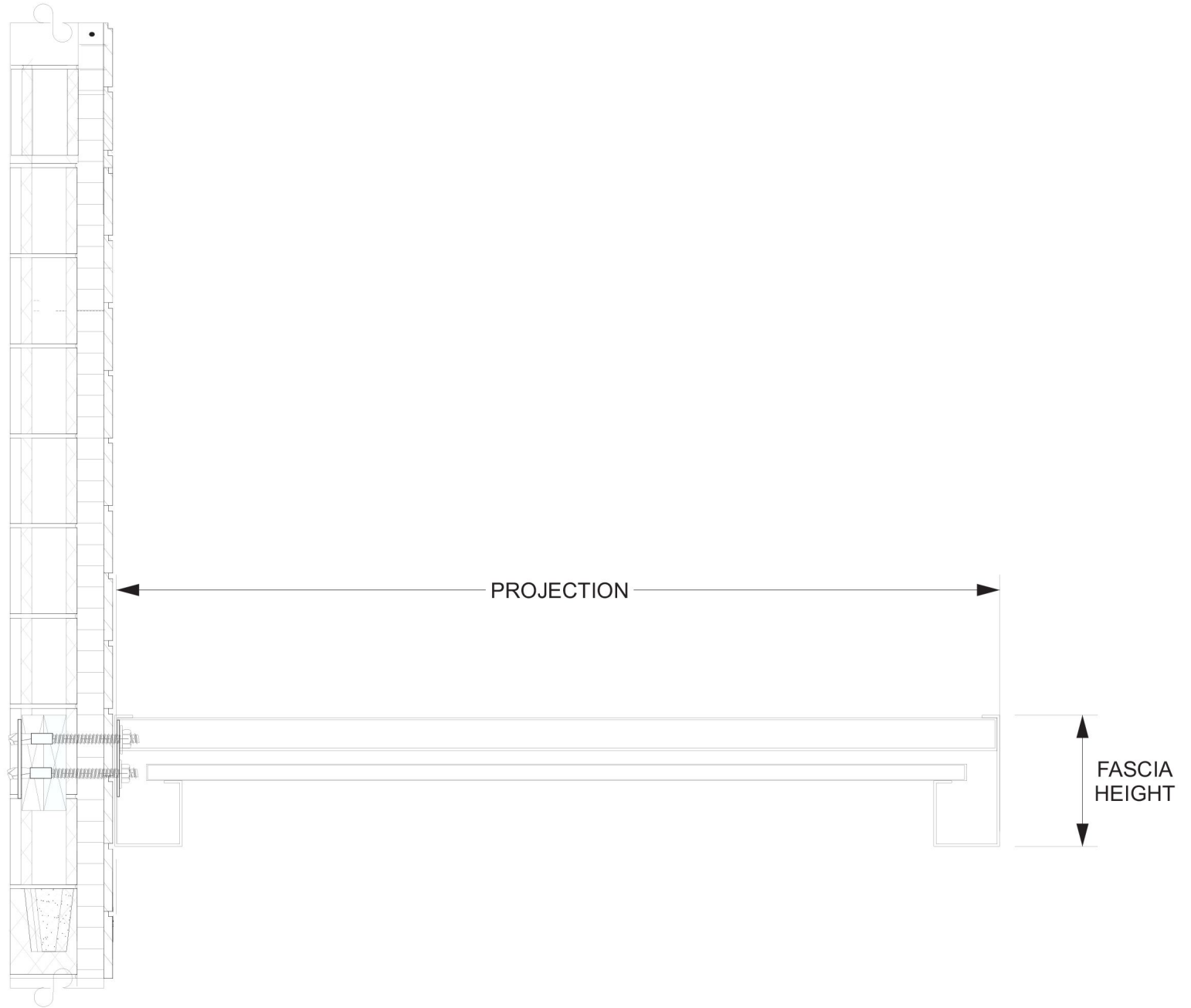


297 OLD COUNTY LINE RD
WESTERVILLE, OHIO
43081
614-426-4206

PROJECT: _____ LOCATION: _____	DATE: _____ DESIGNER: _____ ENGINEER: _____	CANOPY TYPE DETAILS _____ _____ _____	APPROVED <input type="checkbox"/> APPROVED WITH CORRECTIONS <input type="checkbox"/> NOT APPROVED RESUBMIT <input type="checkbox"/>
PROJECT MANAGER: _____ PROPOSED: _____	FILE FOLDER: _____ PAGE OF _____	_____ _____ _____	SIGNATURE: _____

CANTILEVERED CANOPY

CROSS SECTION



PROJECT: _____ LOCATION: _____	DATE: _____ DESIGNER: _____	CANOPY TYPE DETAILS _____ _____	APPROVED <input type="checkbox"/> APPROVED WITH CORRECTIONS <input type="checkbox"/> NOT APPROVED RESUBMIT <input type="checkbox"/>
PROJECT MANAGER: _____ PROPOSED: _____	ENGINEER: _____ FILE FOLDER: _____ PAGE OF _____	_____ _____ _____	SIGNATURE: _____

FLAT STANDARD (.081)



ROLL FORMED (GAUGE VARIES)



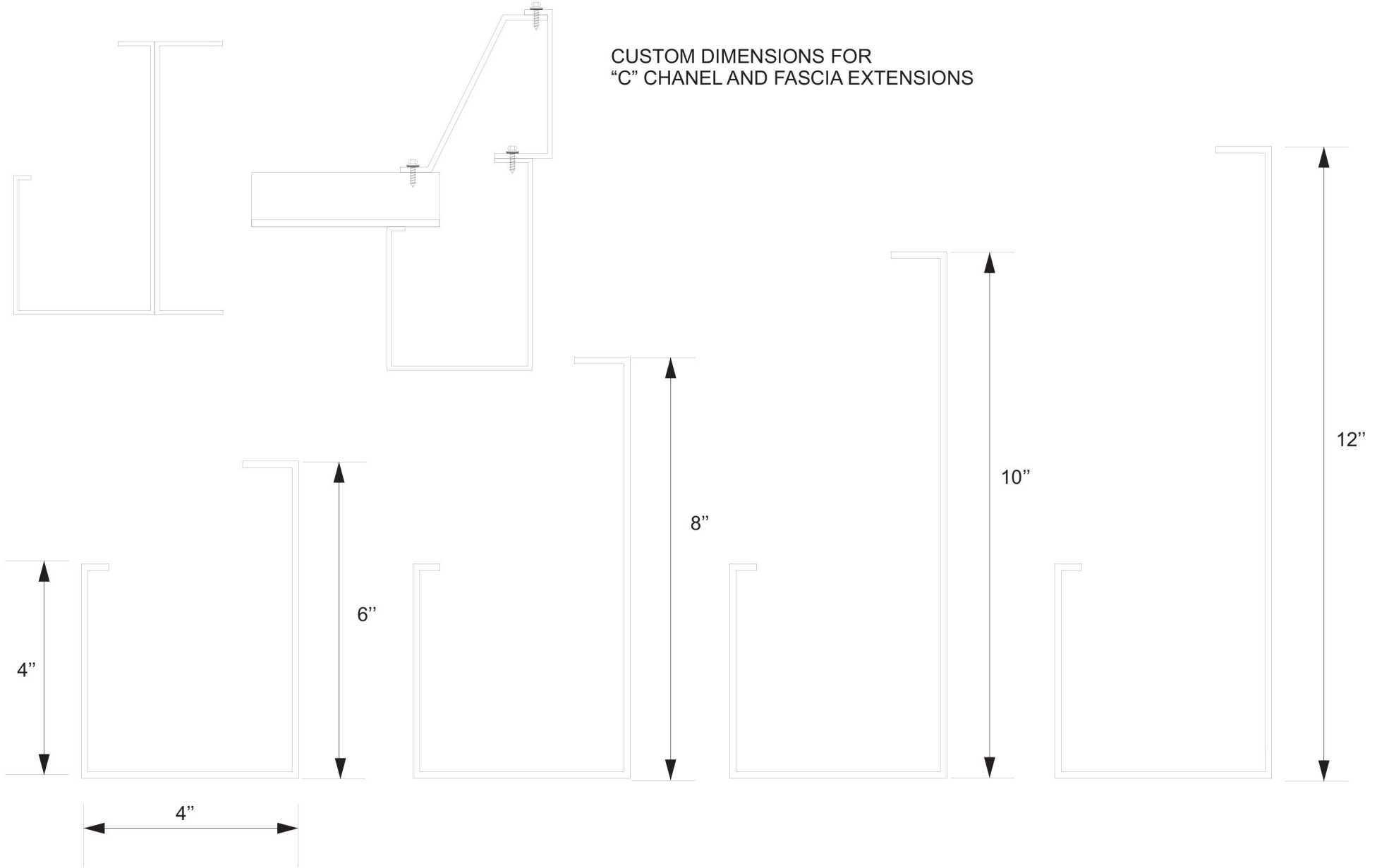
CAP AND PAN



PROJECT: _____ LOCATION: _____ PROJECT MANAGER: _____ PROPOSED: _____	DATE: _____ DESIGNER: _____ ENGINEER: _____ FILE FOLDER: _____ PAGE OF _____	CANOPY TYPE DETAILS _____ _____ _____ _____	APPROVED <input type="checkbox"/> APPROVED WITH CORRECTIONS <input type="checkbox"/> NOT APPROVED RESUBMIT <input type="checkbox"/> SIGNATURE: _____
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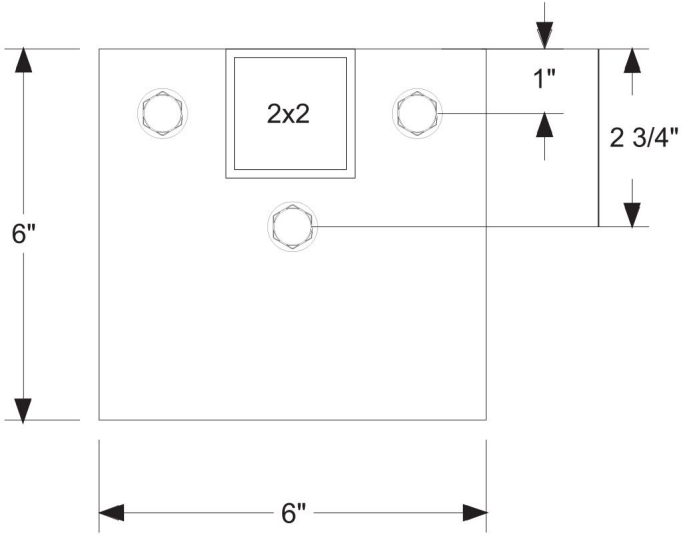
CANTILEVERED CANOPY
GUTTER FASCIAS

CUSTOM DIMENSIONS FOR
"C" CHANEL AND FASCIA EXTENSIONS



PROJECT: _____ LOCATION: _____	DATE: _____ DESIGNER: _____	CANOPY TYPE DETAILS _____ _____	APPROVED <input type="checkbox"/> APPROVED WITH CORRECTIONS <input type="checkbox"/> NOT APPROVED RESUBMIT <input type="checkbox"/>
PROJECT MANAGER: _____ PROPOSED: _____	ENGINEER: _____ FILE FOLDER: _____ PAGE OF _____	_____ _____ _____	SIGNATURE: _____

SUPPORT ARM MOUNTING PLATE:



CANTILEVERED ARMS

2" X 2" X 1/8" WALL STEEL SUPPORT ARMS

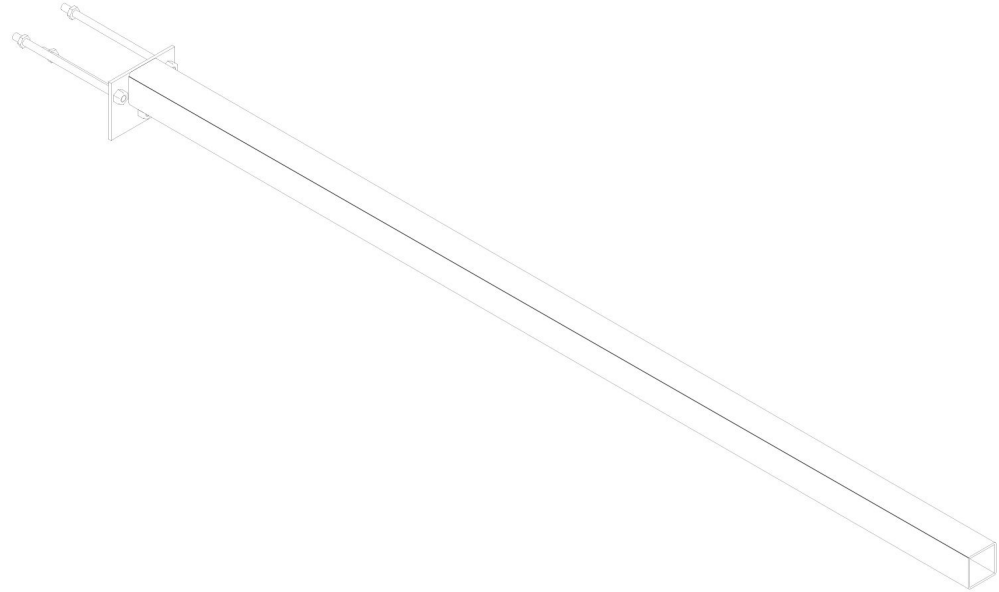
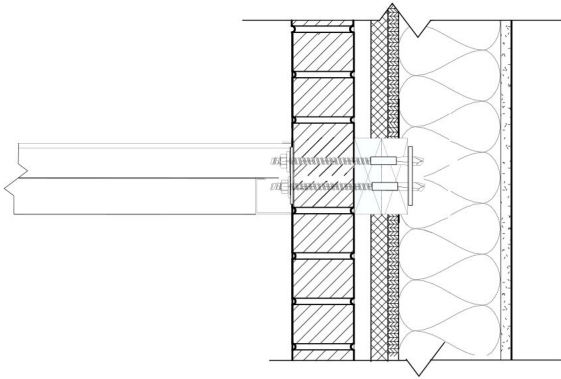


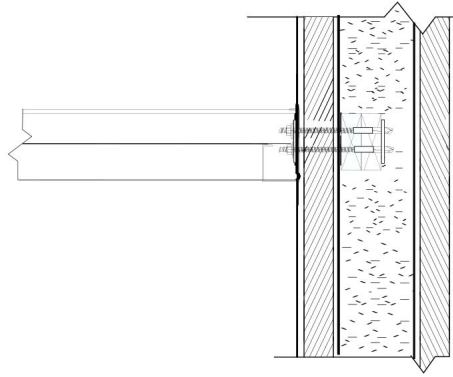
PLATE SIZES MAY VARY PER AWNING

<p>PROJECT: _____</p> <p>LOCATION: _____</p> <p>PROJECT MANAGER: _____</p> <p>PROPOSED: _____</p>	<p>DATE: _____</p> <p>DESIGNER: _____</p> <p>ENGINEER: _____</p> <p>FILE FOLDER: _____</p> <p>PAGE OF _____</p>	<p>CANOPY TYPE DETAILS</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>APPROVED <input type="checkbox"/></p> <p>APPROVED WITH CORRECTIONS <input type="checkbox"/></p> <p>NOT APPROVED RESUBMIT <input type="checkbox"/></p> <p>SIGNATURE: _____</p>
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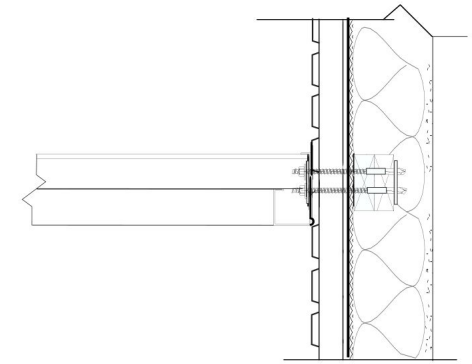
CANTILEVERED CANOPY
WALL ATTACHMENTS



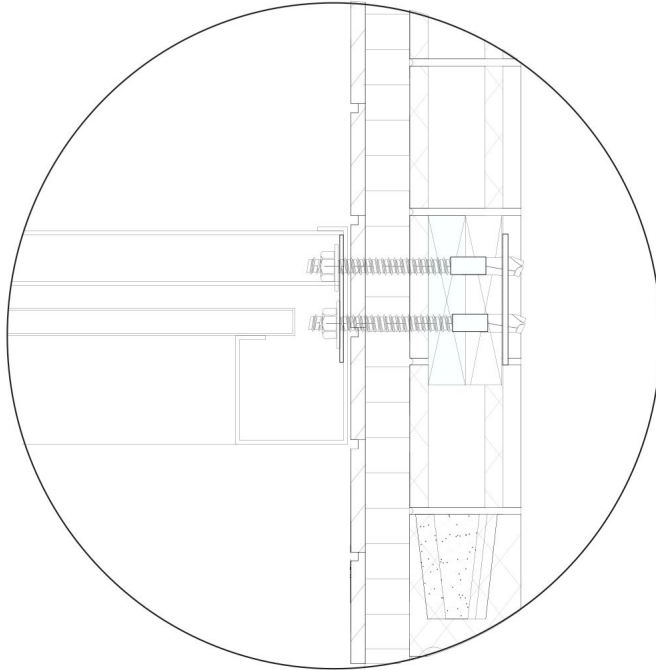
BRICK/BLOCK FASCIAS



CMU FASCIAS



METAL FASCIAS



THREE 3/8"
THROUGH
BOLTS PER
SUPPORT ARM
2 PER SECTION
5'-0" C to C

PROJECT: _____
LOCATION: _____
PROJECT MANAGER: _____
PROPOSED: _____

DATE: _____
DESIGNER: _____
ENGINEER: _____
FILE FOLDER: _____
PAGE OF _____

CANOPY TYPE DETAILS

APPROVED
APPROVED WITH CORRECTIONS
NOT APPROVED RESUBMIT

SIGNATURE: _____