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|-----|-------------------------|----------|-----|
| 4   | ISSUE FOR DA            | 06.03.17 | EH  |
| 3   | ISSUE FOR DA            | 28.02.17 | EH  |
| 2   | ISSUE FOR DA SUBMISSION | 27.02.17 | HMC |
| 1   | ISSUE FOR DA SUBMISSION | 06.05.16 | CX  |
| Rev | Revision description    | Date     | By  |

Project  
**PRIVATE HOSPITAL  
ST LEONARDS**

Principal  
**DEXUS PROPERTY GROUP**

USE FIGURED DIMENSIONS ONLY. DO NOT SCALE.  
ALL DIMENSIONS SHALL BE VERIFIED ON SITE AND DISCREPANCIES IMMEDIATELY BROUGHT TO THE ATTENTION OF THE PROJECT MANAGER FOR RESOLUTION

"CLOUDS" & REVISIONS ARE INTENDED AS GUIDES AND DO NOT NECESSARILY DESCRIBE THE FULL EXTENT OF REVISIONS.  
ASCERTAIN FULL EXTENT BY COMPARISON WITH PREVIOUS VERSION.

**QA**  
CHECK

| Subject | By | Date | Subject    | By | Date | Subject    | By | Date |
|---------|----|------|------------|----|------|------------|----|------|
| RDS     |    |      | STRUCT     |    |      | PROJ. ARCH |    |      |
| ARCH    |    |      | SPEC. CONS |    |      |            |    |      |
| AUT     |    |      | SERV       |    |      |            |    |      |

TRUE  
NORTH

PROJECT  
NORTH

Drawn  
EH

Checked  
CX

Date  
9.2.2016

Scale  
1:500 @ A3

Drawing Title  
**LEVEL 2 FLOOR PLAN**

**HP** **HEALTH PROJECTS INTERNATIONAL**  
Architects and Health Facility Planners  
ACN 066 856 595  
Ground Floor, Suite 1, 68 Alfred Street  
Miltons Point, NSW 2061  
Ph: (02) 9460 4199 Fax: (02) 9460 4299

Dwg No.  
**A-P-2**

Issue  
**4**