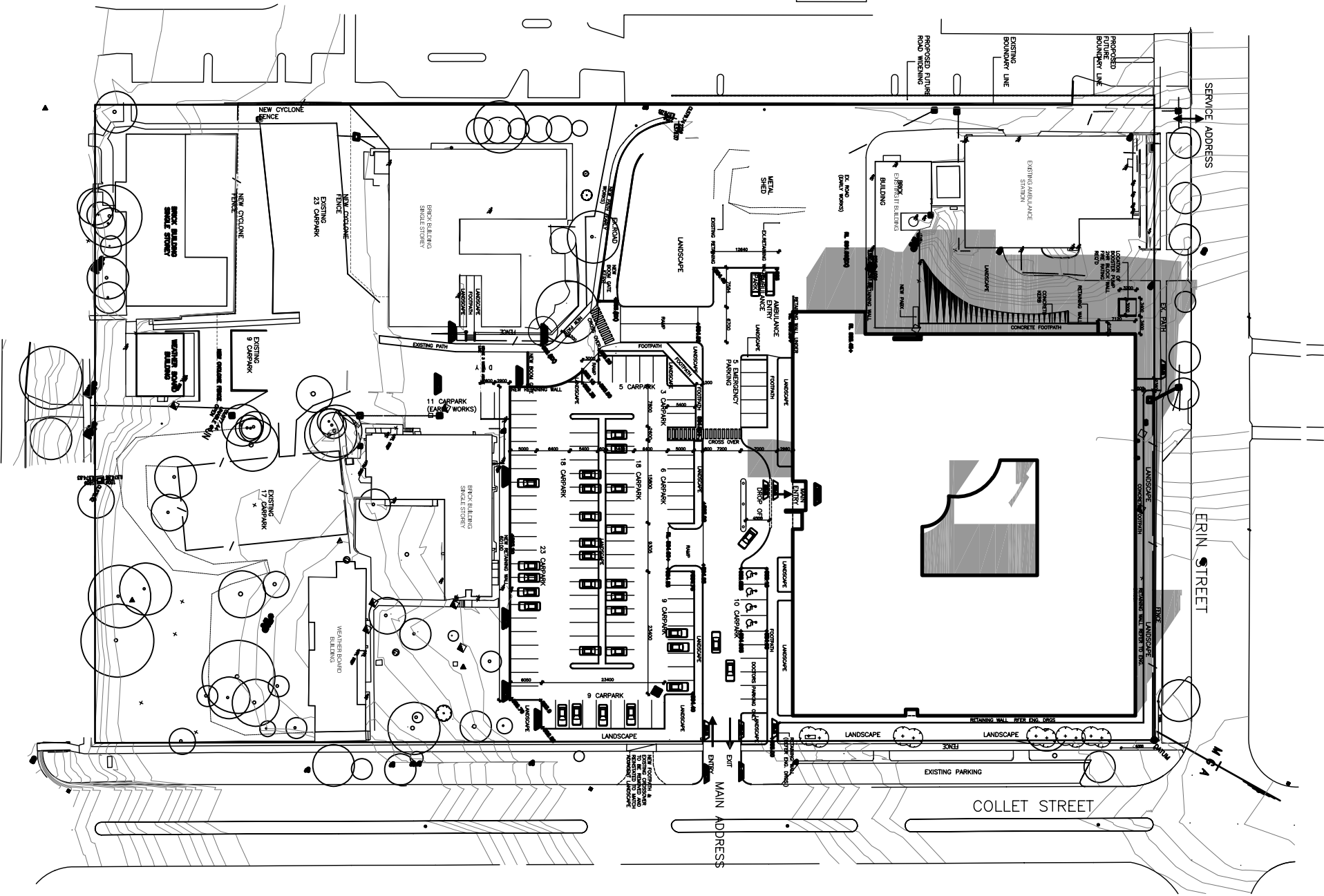
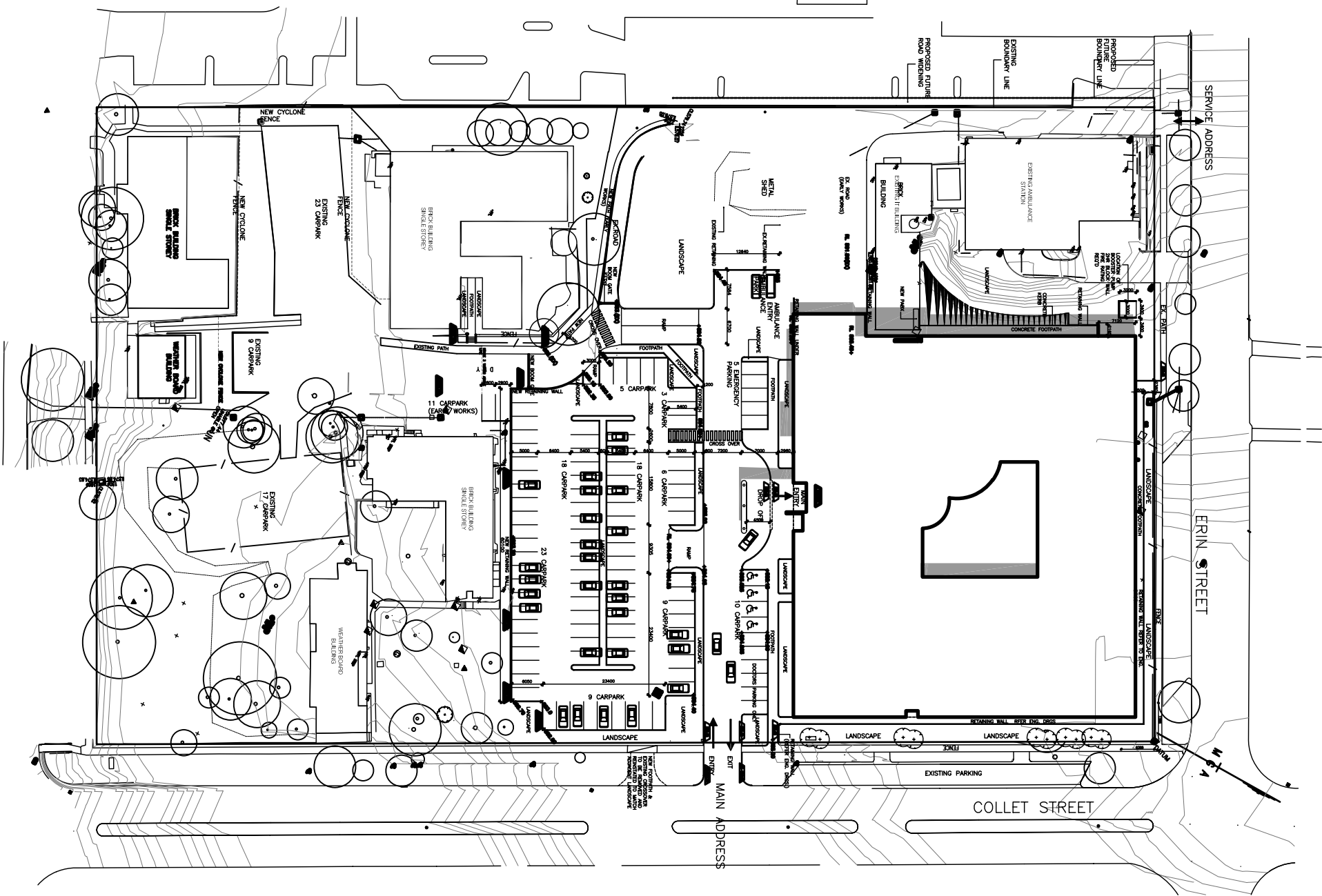
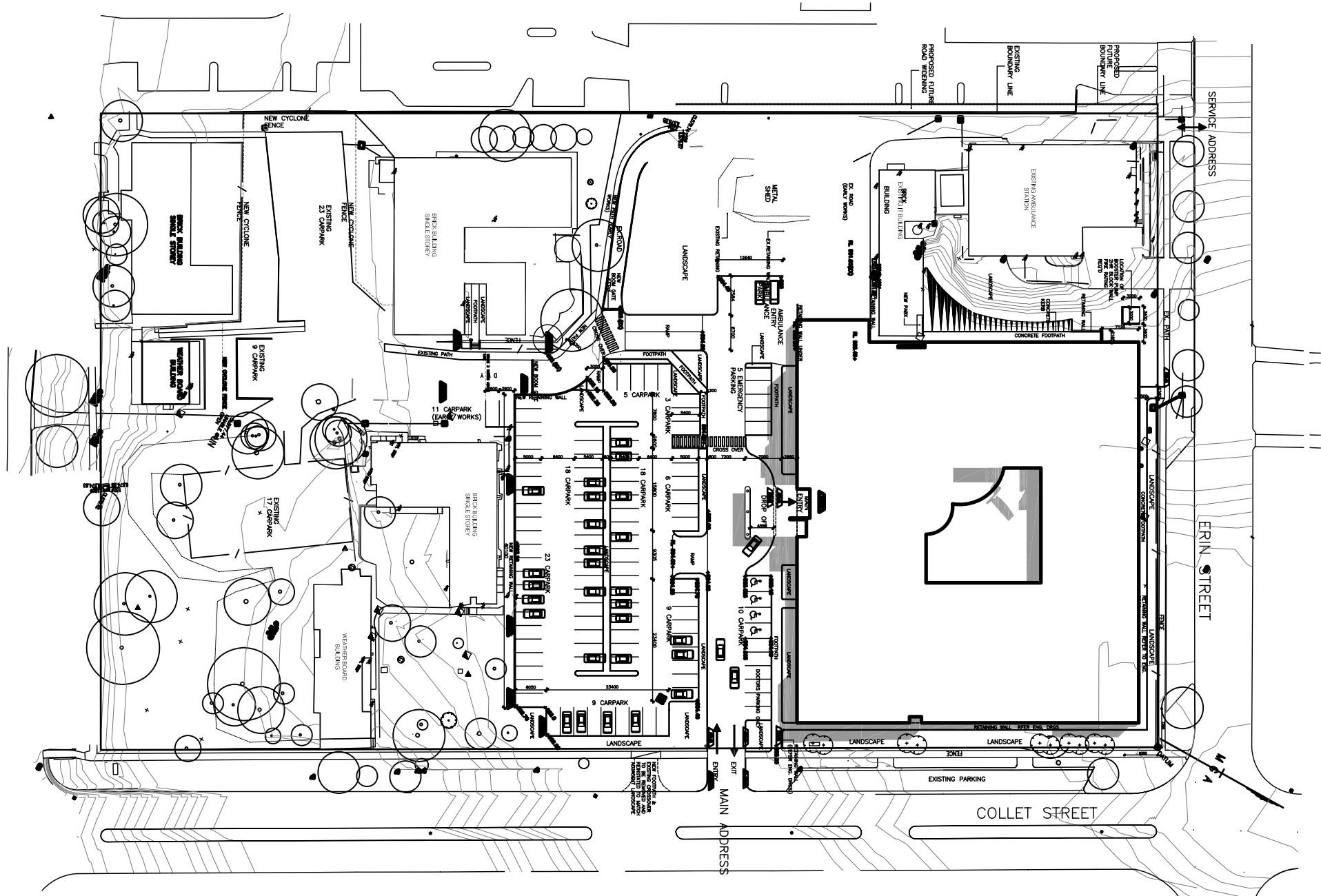




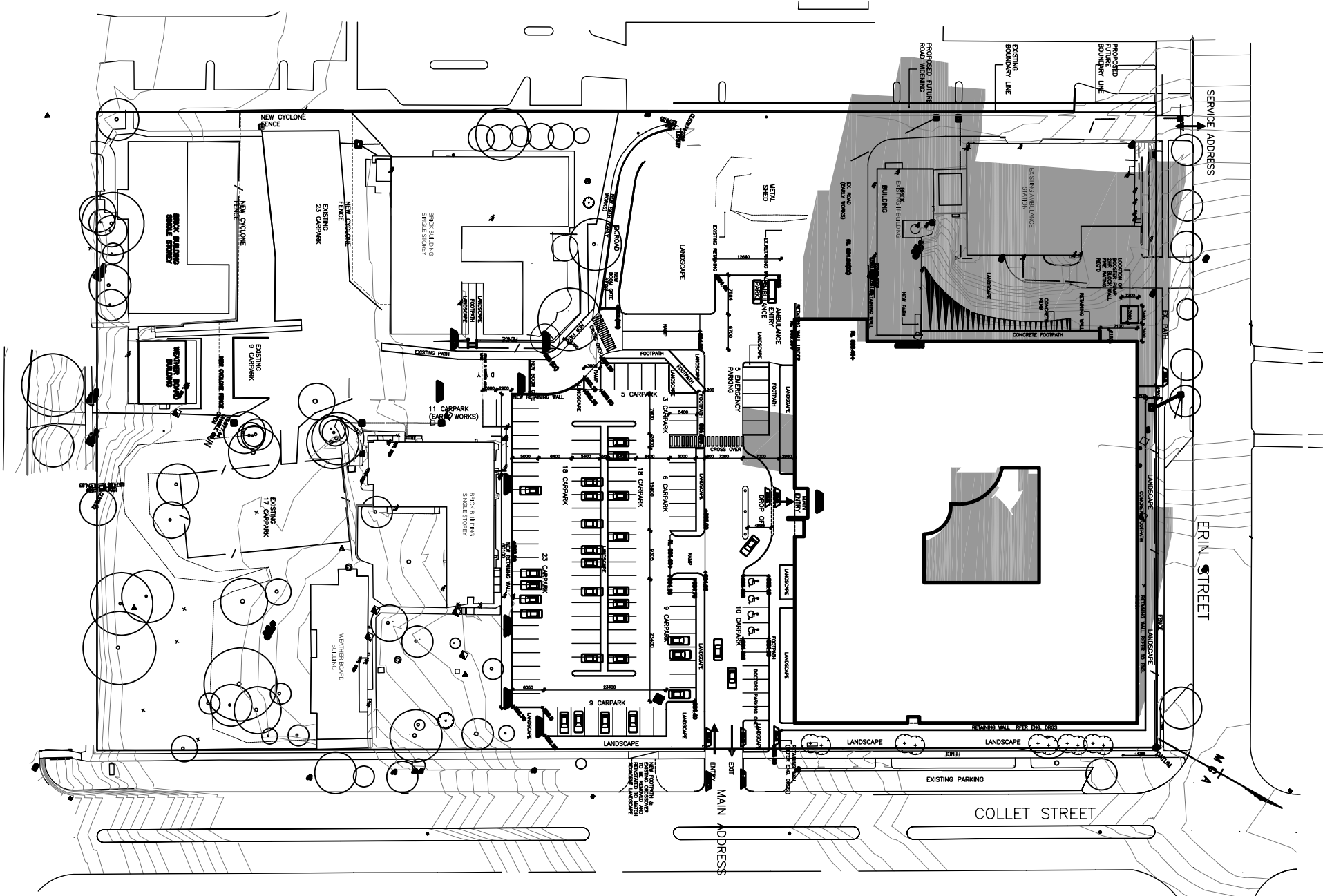
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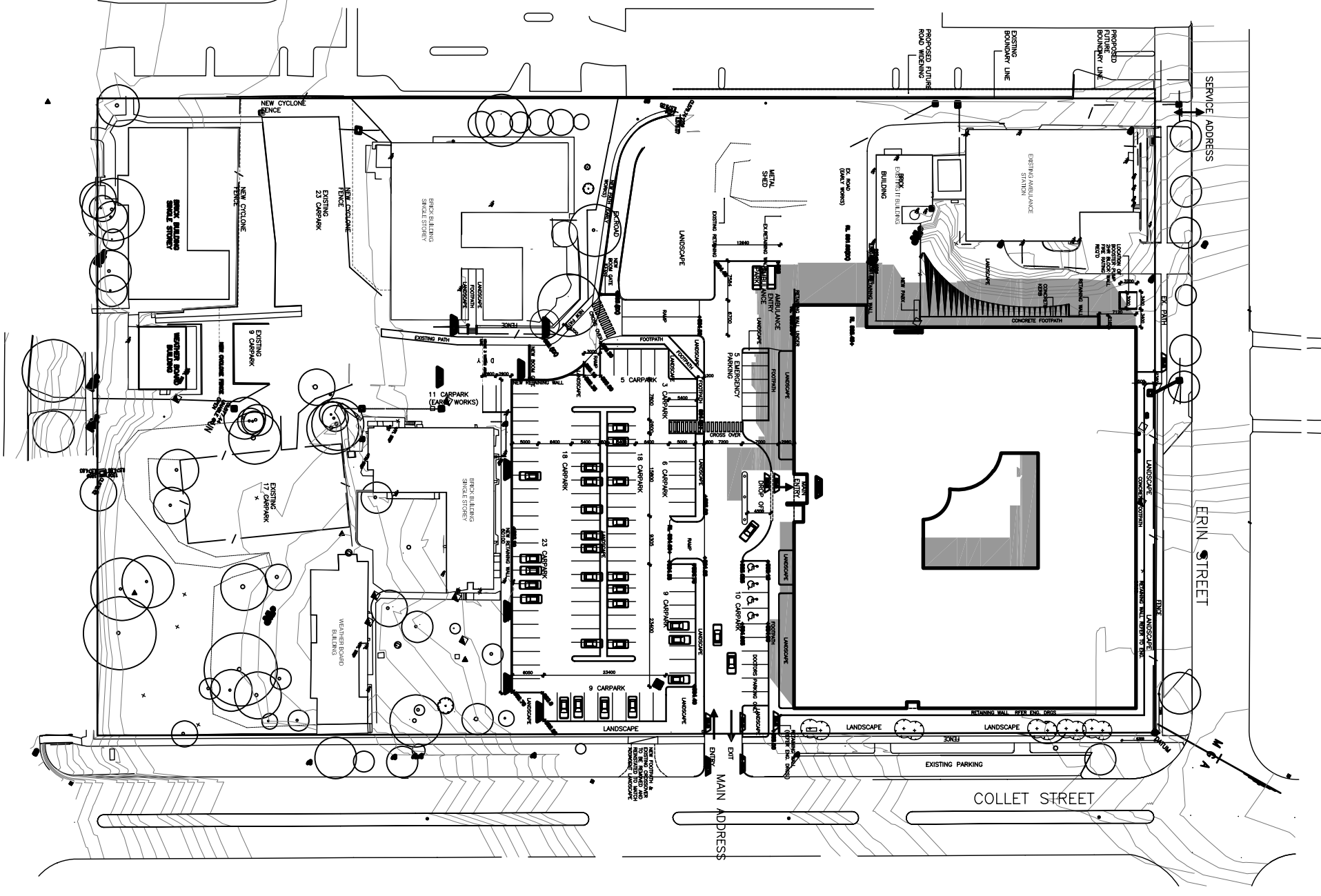
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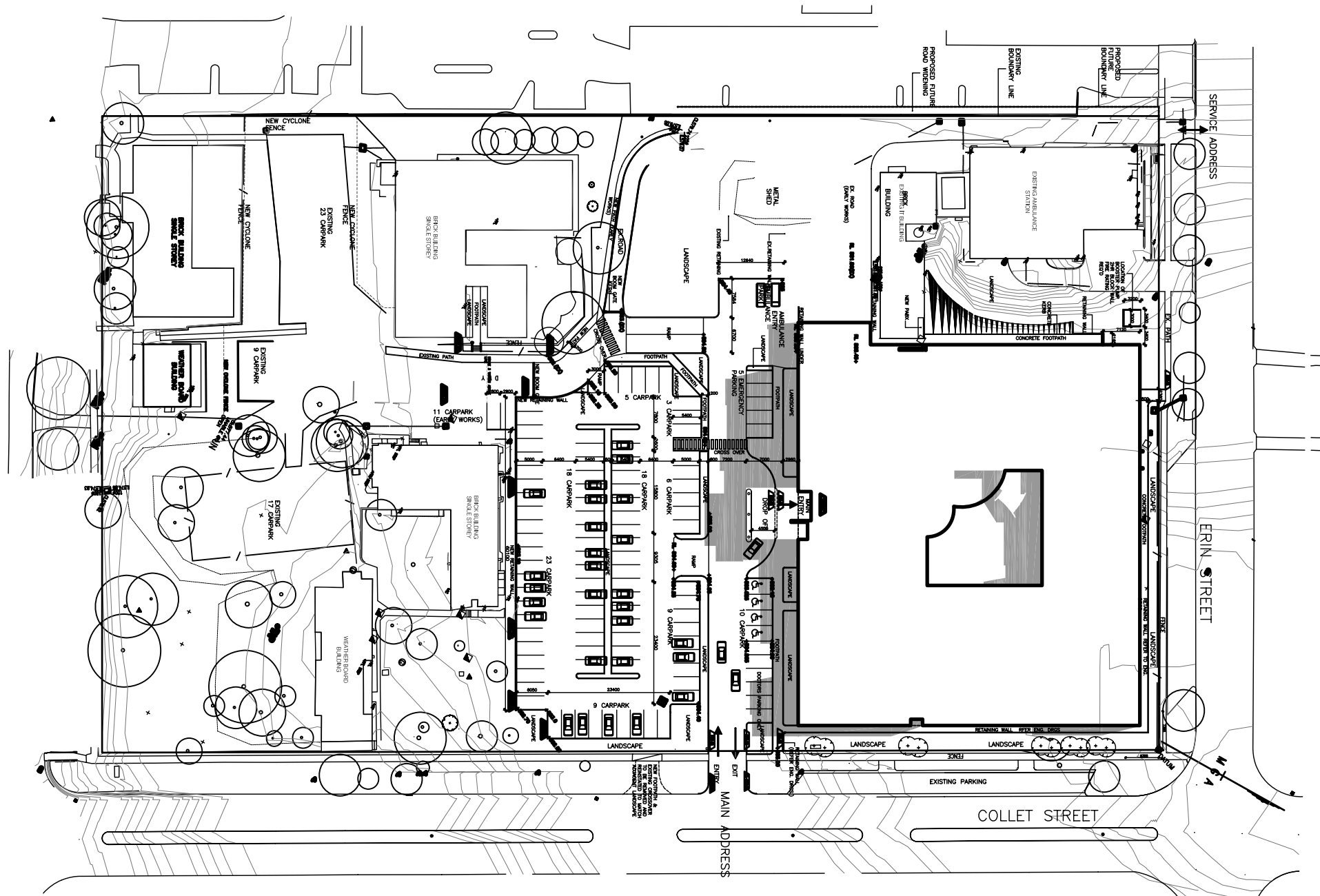
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04 MARCH/SEP 22
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06 MARCH/SEP 22
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ISSUE	REVISION	DRN	CHK	APP	DATE	ISSUE	REVISION

health#

PLANNING CONSULTANTS

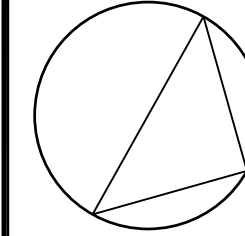
Architects
Strategic and
Facility Planners

Melbourne

Level 28
141 William Street
Melbourne, Victoria 3000
Tel: (03) 8602 4273
Fax: (03) 8602 4029
http://www.hpsc.com.au
ACN 050 195 170
ABN 54 050 195 170

Sydney

Barramundi
21A Ebbett Street
Sydney, New South Wales 2041
Tel: (02) 9810 0666
Fax: (02) 9810 0432
http://www.hpsc.com.au
ACN 050 195 170
ABN 54 050 195 170



HEALTH SCIENCE PLANNING APPROVALS		
Reason for Issue	DATE	
PRELIMINARY		
Approved		
Checked		
I hereby certify that the information contained in this drawing is true and correct to the best of my knowledge and belief, and that I am not aware of any circumstances which might render the information misleading or deceptive.		

PROJECT QUEANBEYAN HOSPITAL REDEVELOPMENT		
DEVELOPMENT APPLICATION		
SHADOW DIAGRAMS		
SITE PLAN		
SCALE	DRAWN	PROJECT NO
1:1000	SM	4-5040
DRAWING NO		REV.
QB-DD-003		