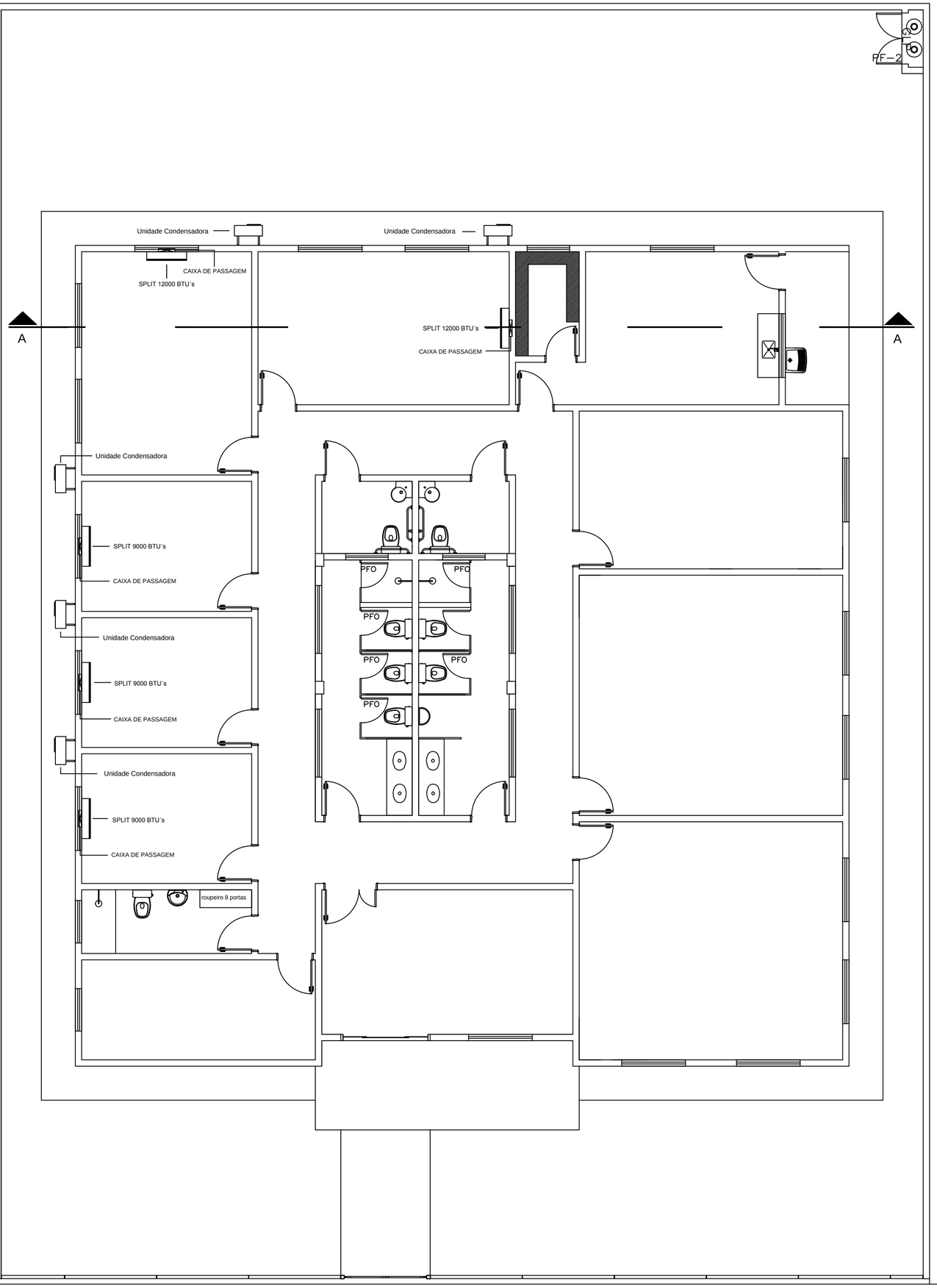
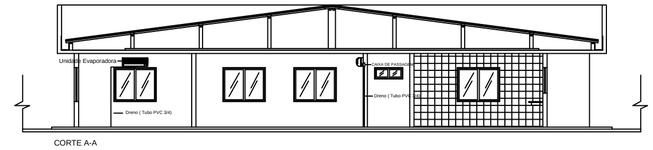
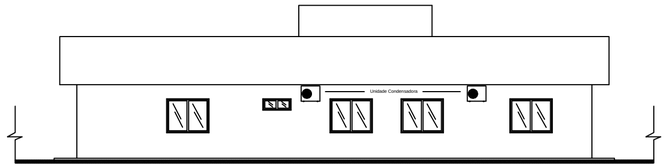
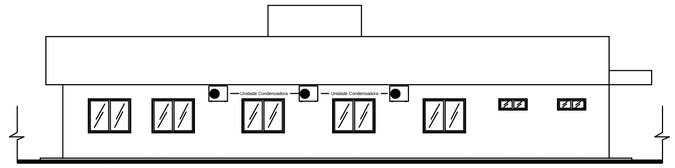




CORTE A-A



FACHADA POSTERIOR



FACHADA LATERAL ESQUERDA

APROVAÇOES:

Tipo:

Proprietario:

End. da Obra:

PROPRIETÁRIO:
xxxxxxxxx:
CPF :

AUTOR DO PROJETO:
Arquiteto / Engenheiro:
CAU/CREA:

RESPONSAVEL TÉCNICO:
Arquiteto / Engenheiro:
CAU/CREA:

AREAS:

Terreno:
AREAS:
AREAS:
AREAS:
AREAS:
AREAS:
AREAS:

CONTEUDO:

Planta de Situação:
Planta Baixa:
xxxx:

Desenho:

Escala: xxxxx
x/xxx

Data:
xx/xx/xxxx

LOGOMARCA

Revisão:

/ /

PRANCHA:

1/x