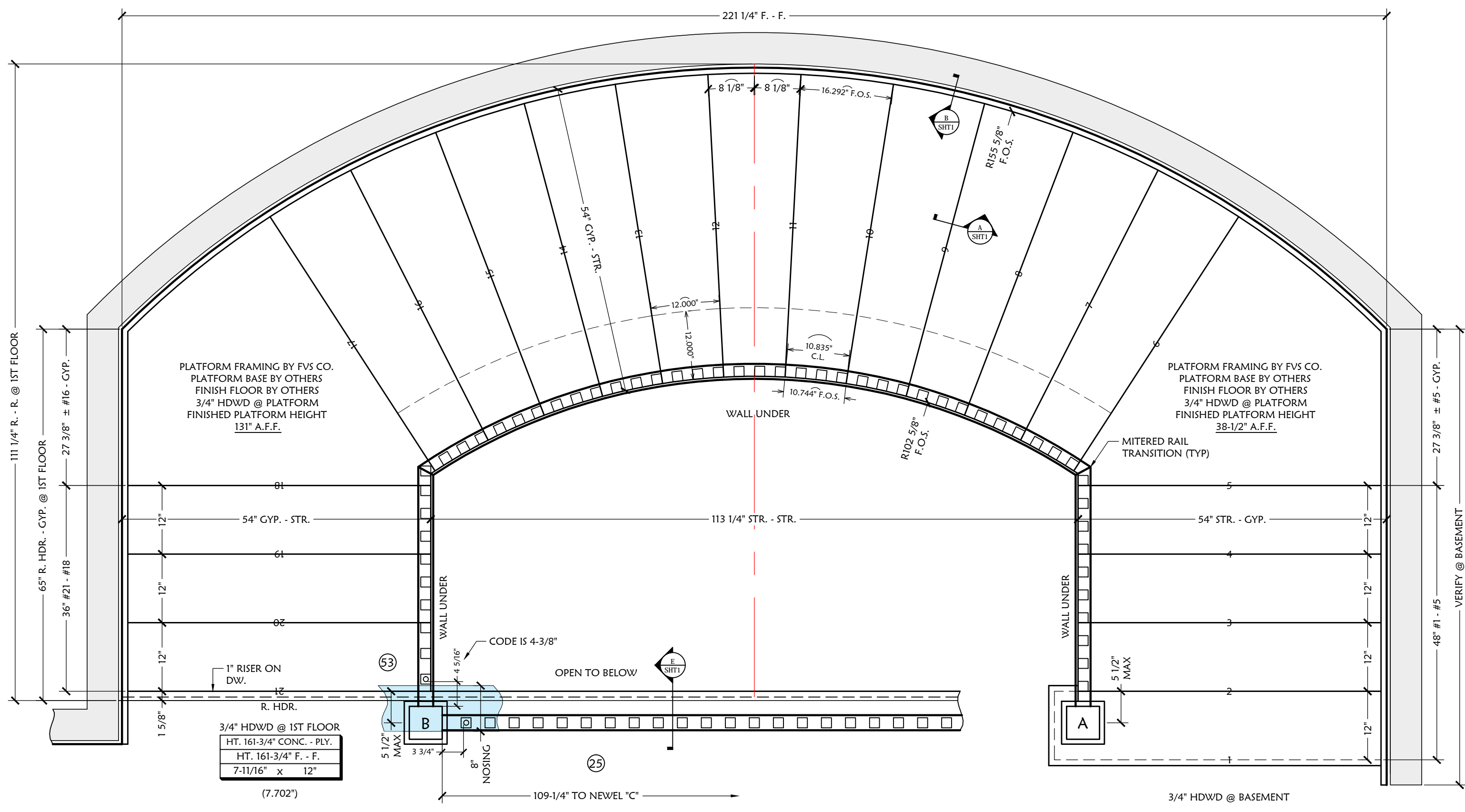
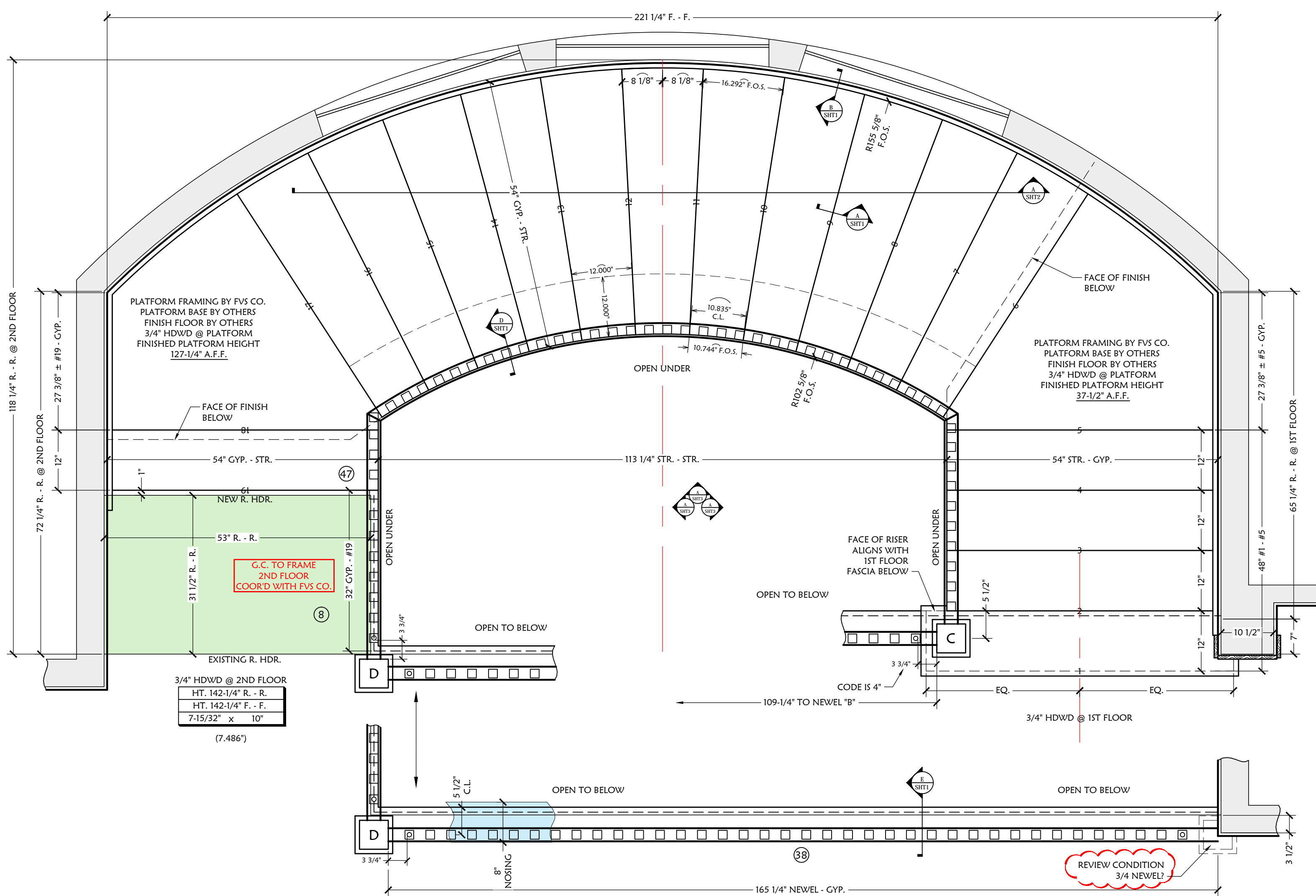




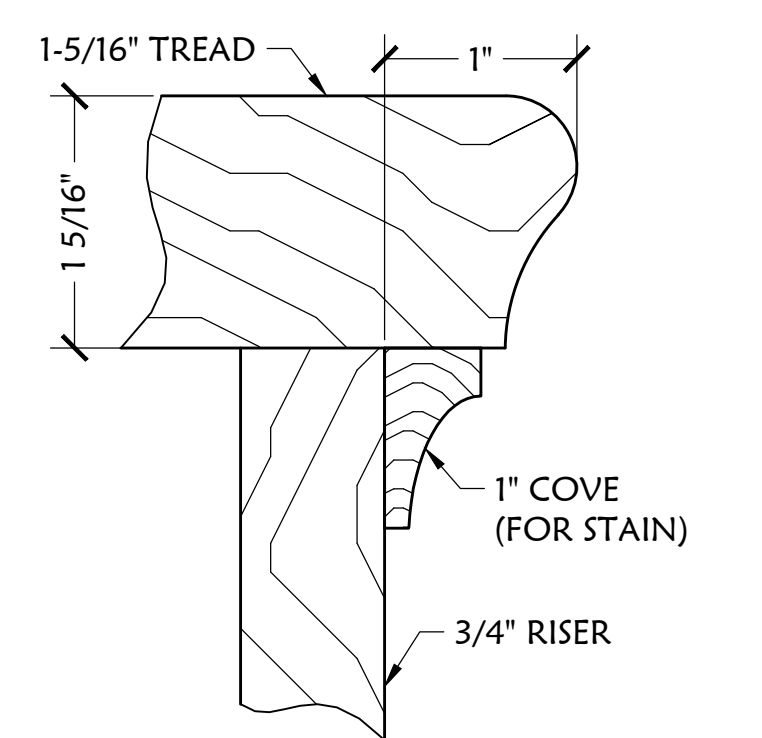
MAIN STAIRS



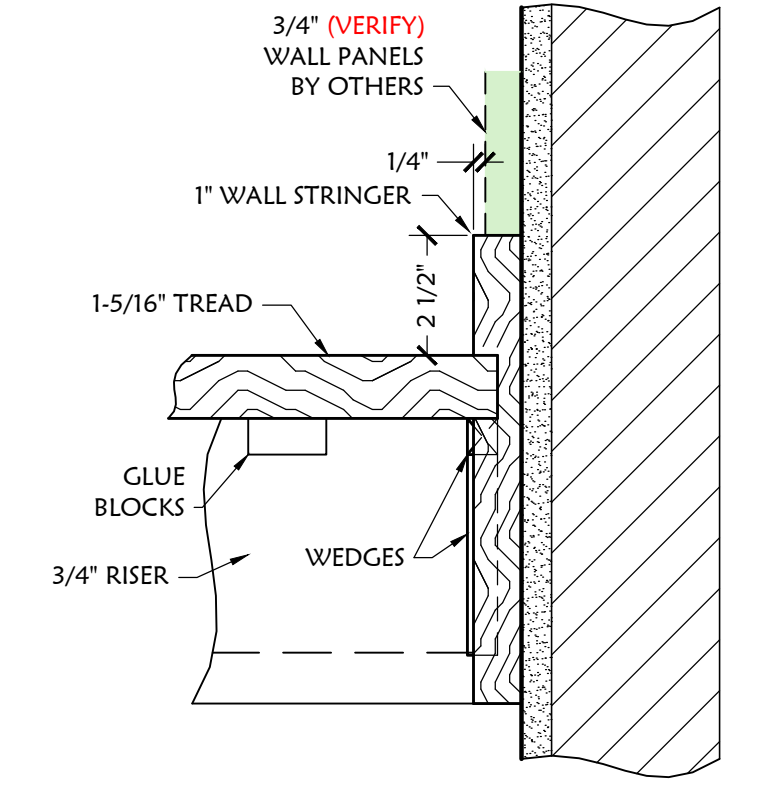
BASEMENT TO 1ST FLOOR
SCALE: 3/4"=1'-0"



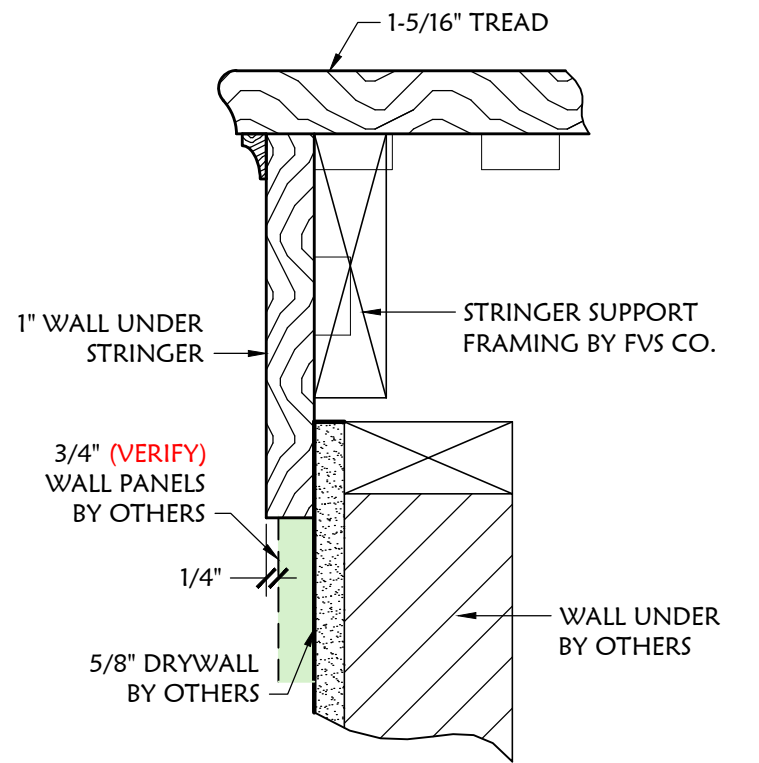
1ST TO 2ND FLOOR STAIR
SCALE: 3/4"=1'-0"



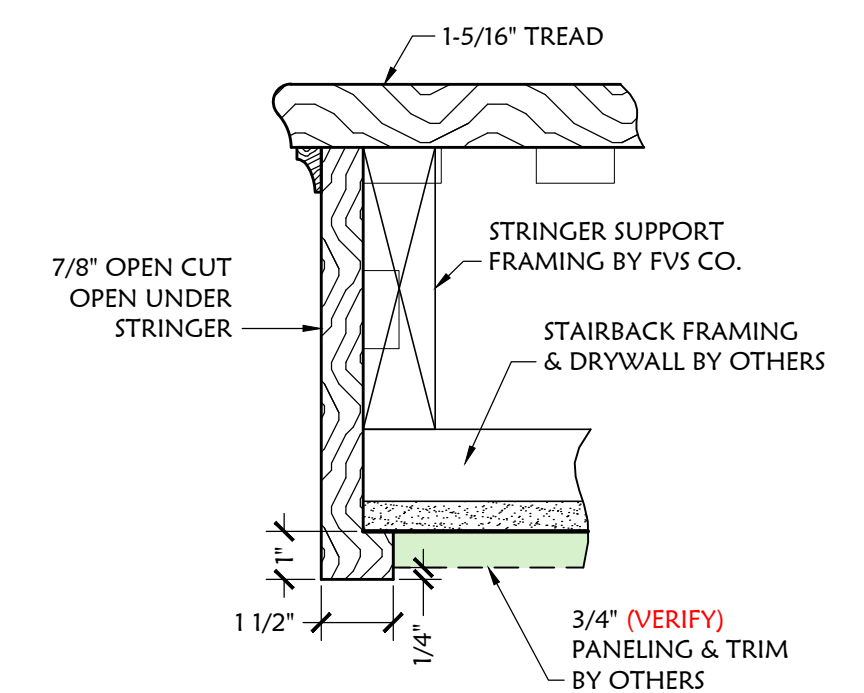
TREAD / RISER DETAIL
SCALE: FULL
DETAIL APPROVED PER OWNER 8-3-18



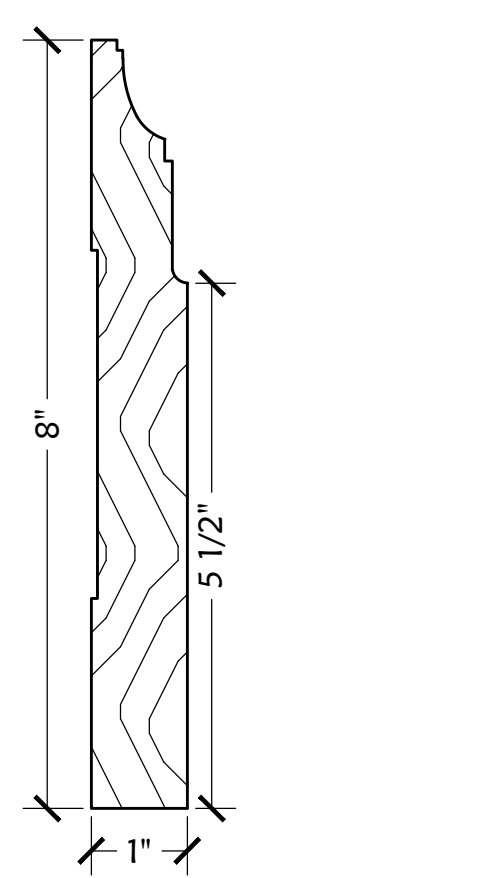
WALL STRINGER (TYP)
SCALE: 3"=1'-0"



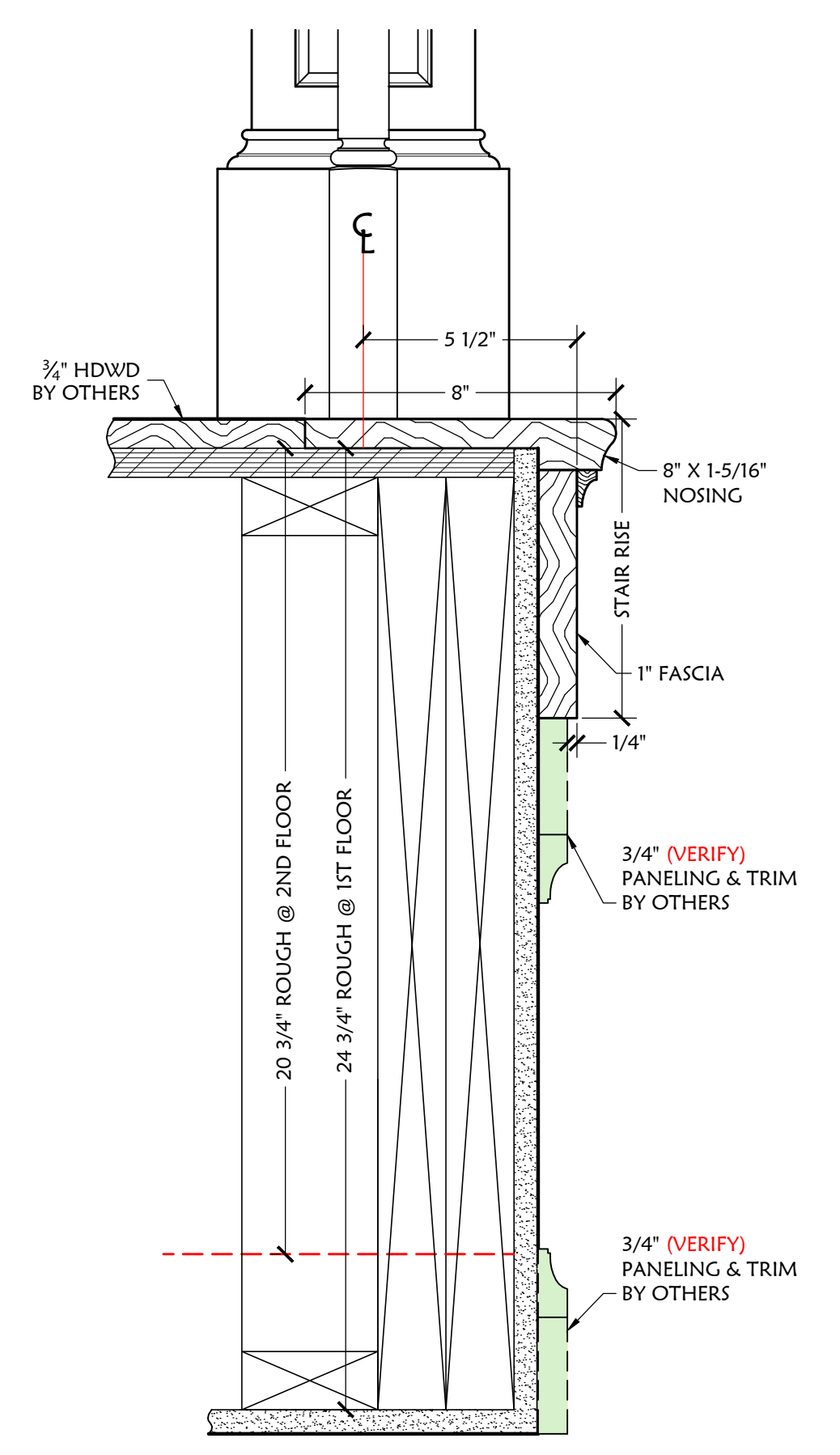
WALL UNDER STRINGER (TYP)
SCALE: 3"=1'-0"



OPEN UNDER STRINGER
SCALE: 3"=1'-0"

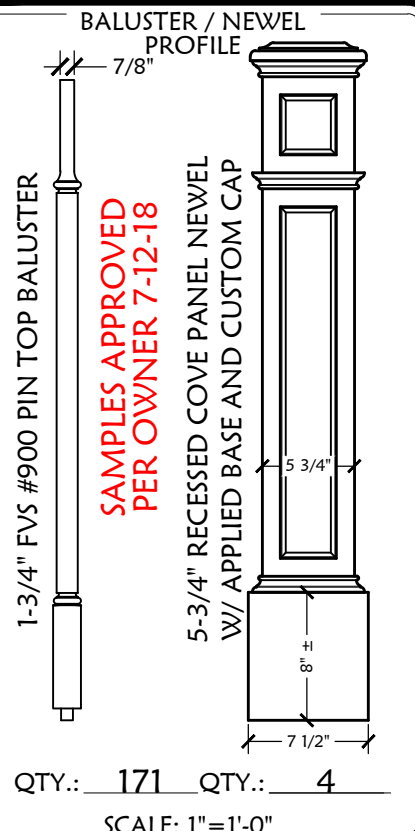


HOUSE BASE
SCALE: 6"=1'-0"

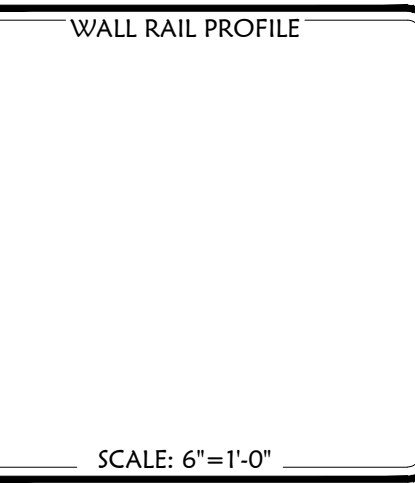
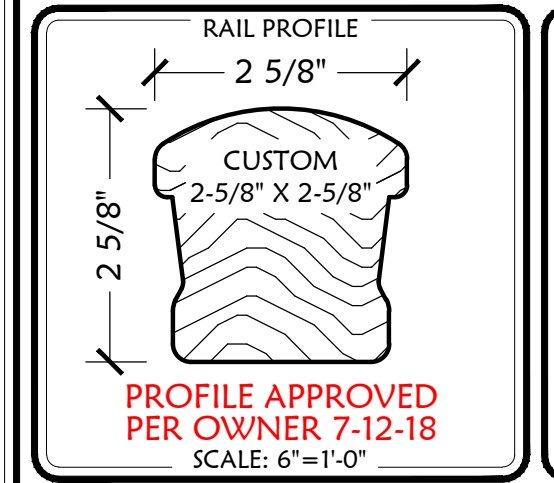


FLOOR TRIM (TYP)
SCALE: 3"=1'-0"

TREADS:	PLAIN SAWN W.O.
NEWELS:	PAINT GRADE
RAILS:	PLAIN SAWN W.O.
STRINGERS:	POPLAR
RISERS:	POPLAR
BALUSTERS:	PAINT GRADE
HARDWARE:	NONE



JOB NUMBER	<input type="checkbox"/> OFFICE COPY
	<input type="checkbox"/> STAIR SHOP
	<input type="checkbox"/> RAIL SHOP
	<input type="checkbox"/> C.N.C SHOP
	<input type="checkbox"/> INSTALLER
PLAIN SAWN W.O. & POPLAR / P.G.	



Project Manager:	Date:	Checked by:	Date:
Accounting Approval:	Date:	Checked by:	Date:
Approved for Production:	Date:	Checked by:	Date:

Project Manager:	Date:	Checked by:	Date:
Accounting Approval:	Date:	Checked by:	Date:
Approved for Production:	Date:	Checked by:	Date:

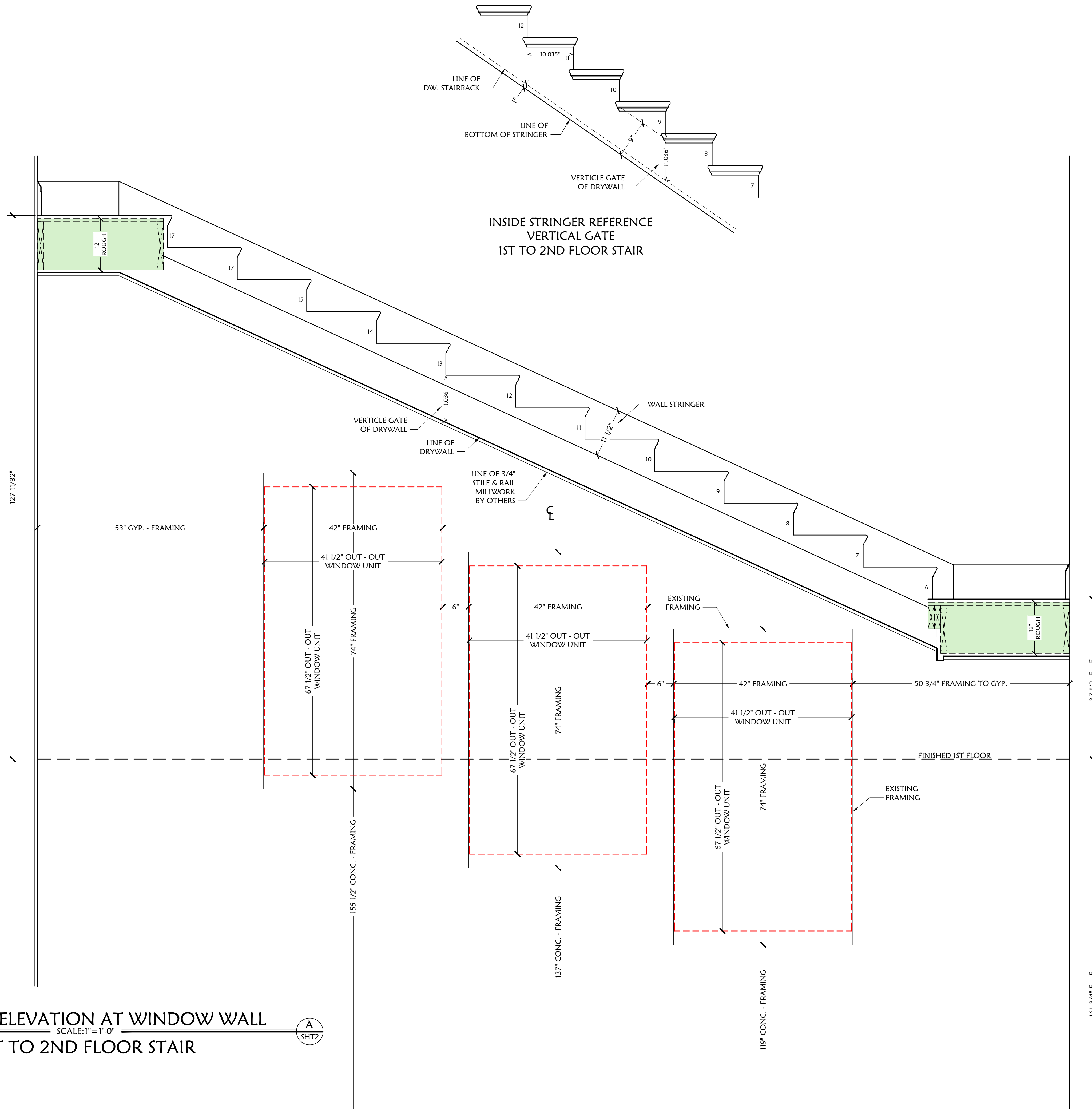
GENERAL NOTES:
BUILDING CODE:
INSTALLER NOTE:

CONTRACTOR: _____ FAX #: _____
OFFICE #: _____ MOBIL #: _____
CONTACT: _____ MOBIL #: _____
JOB LOCATION: _____
WILMETTE, IL
OWNER: _____
PHONE #: _____ MOBIL#: _____
ARCHITECT: _____
CONTACT/DESIGNER: _____
OFFICE #: _____ FAX #: _____
SUPERINTENDENT: _____
OFFICE #: _____ MOBIL #: _____
SCALE: AS SHOWN DRAWN BY: JIM J. DATE: _____
PROJ MNGR: C.M.J. PROPOSAL #: 17078 TAG: 17078 R6

REVISION:	BY:	DATE:	CHK BY:	DATE:
REVISION:	BY:	DATE:	CHK BY:	DATE:
REVISION:	BY:	DATE:	CHK BY:	DATE:
REVISION:	BY:	DATE:	CHK BY:	DATE:

JOB LOCATION MAP:

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E-MAIL: SALES@FOXVALLEYSTAIR.COM



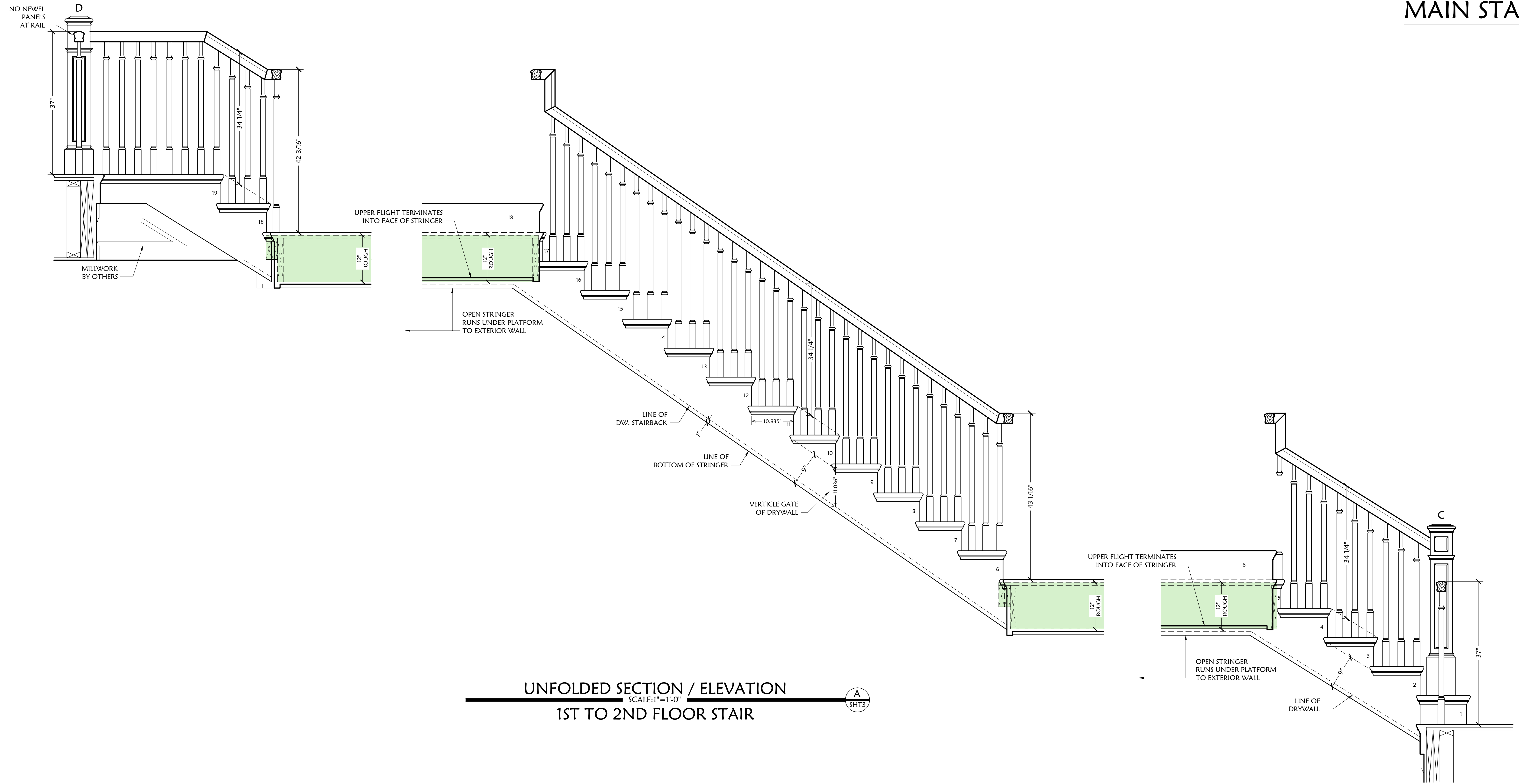
SECTION / ELEVATION AT WINDOW WALL
 SCALE: 1"=1'-0"
 1ST TO 2ND FLOOR STAIR

A
 SHT2



CONTRACTOR: _____
 JOB LOCATION: _____ WILMETTE, IL
 OWNER: _____
 SCALE: AS SHOWN DRAWN BY: JIM J. DATE: _____
 PROJ MNGR: C.M.J. PROPOSAL #: 17078_TAG: 17078_R6
 DRAWING PATH: _____

MAIN STAIRS



UNFOLDED SECTION / ELEVATION
 SCALE: 1" = 1'-0"
 1ST TO 2ND FLOOR STAIR

A
SHT3

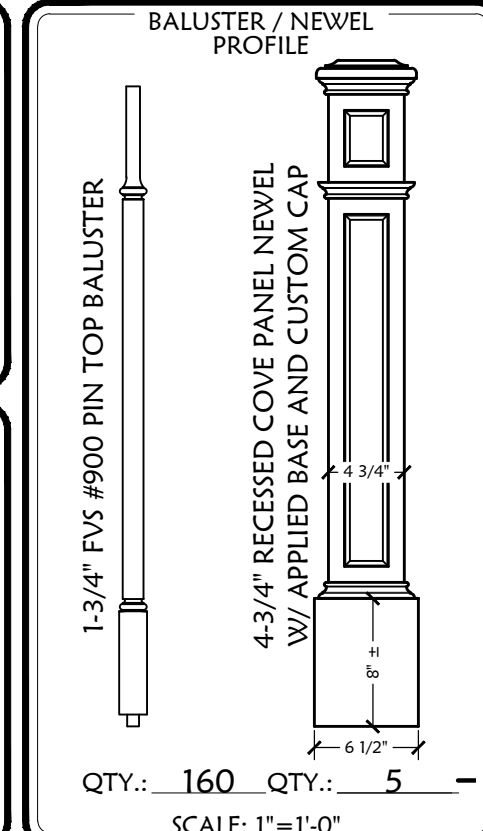


CONTRACTOR: _____
 JOB LOCATION: _____
 WILMETTE, IL
 OWNER: _____
 SCALE: AS SHOWN DRAWN BY: JIM J. DATE: _____
 PROJ MNGR: C.M.J. PROPOSAL #: 17078_TAG: 17078_R6
 DRAWING PATH: _____

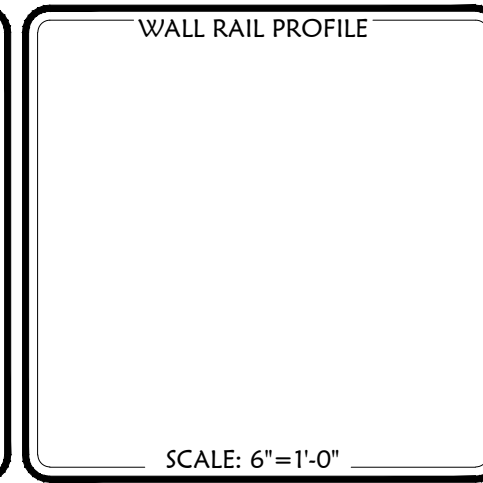
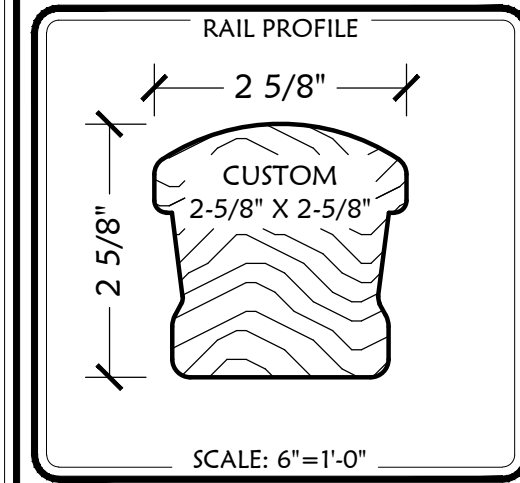
REAR STAIRS



MATERIAL
TREADS: PLAIN SAWN W.O.
NEWELS: PAINT GRADE
RAILS: PLAIN SAWN W.O.
STRINGERS: POPLAR
RISERS: POPLAR
BALUSTERS: PAINT GRADE
HARDWARE: T.B.D.



JOB NUMBER
 OFFICE COPY
 STAIR SHOP
 RAIL SHOP
 C.N.C SHOP
 INSTALLER
PLAIN SAWN W.O. & POPLAR / P.G.



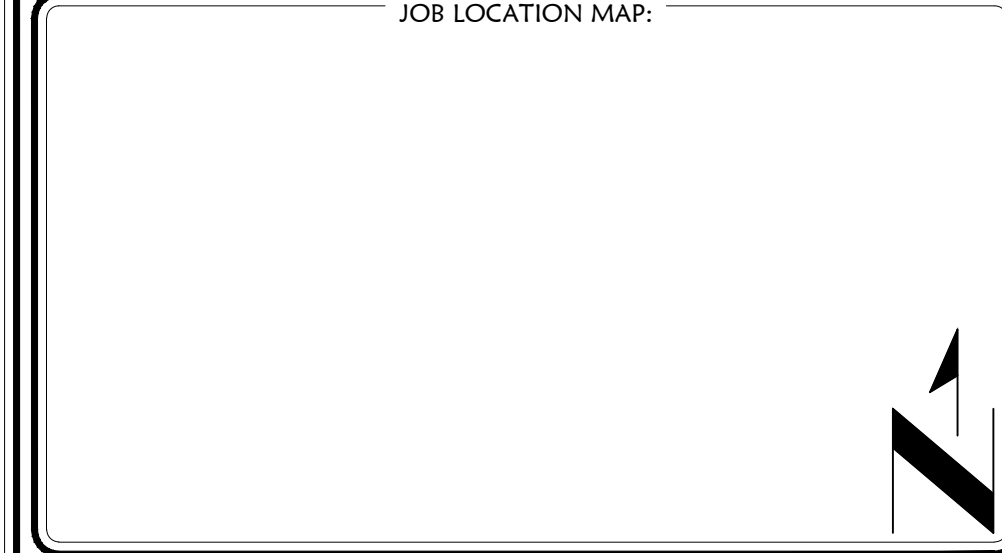
Project Manager: _____ Date: _____
Accounting Approval: _____ Date: _____
Approved for Production: _____ Date: _____

Checked by: _____ Date: _____
Checked by: _____ Date: _____
Date: _____

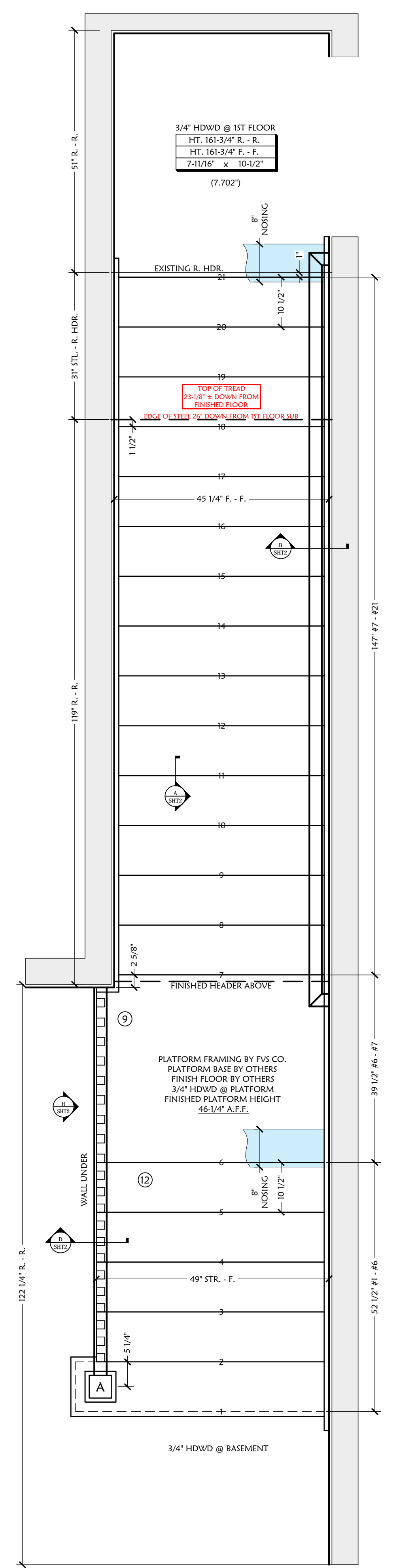
GENERAL NOTES:
BUILDING CODE:
INSTALLER NOTE:

CONTRACTOR: _____
OFFICE #: _____ FAX #: _____
CONTACT: _____ MOBIL #: _____
JOB LOCATION: _____
WILMETTE, IL
OWNER: _____
PHONE #: _____ MOBIL#: _____
ARCHITECT: _____
CONTACT/DESIGNER: _____
OFFICE #: _____ FAX #: _____
SUPERINTENDENT: _____
OFFICE #: _____ MOBIL #: _____
SCALE: AS SHOWN DRAWN BY: JIM J. DATE: _____
PROJ MNGR: C.M.J. PROPOSAL #: 17078 TAG: 17078 R6

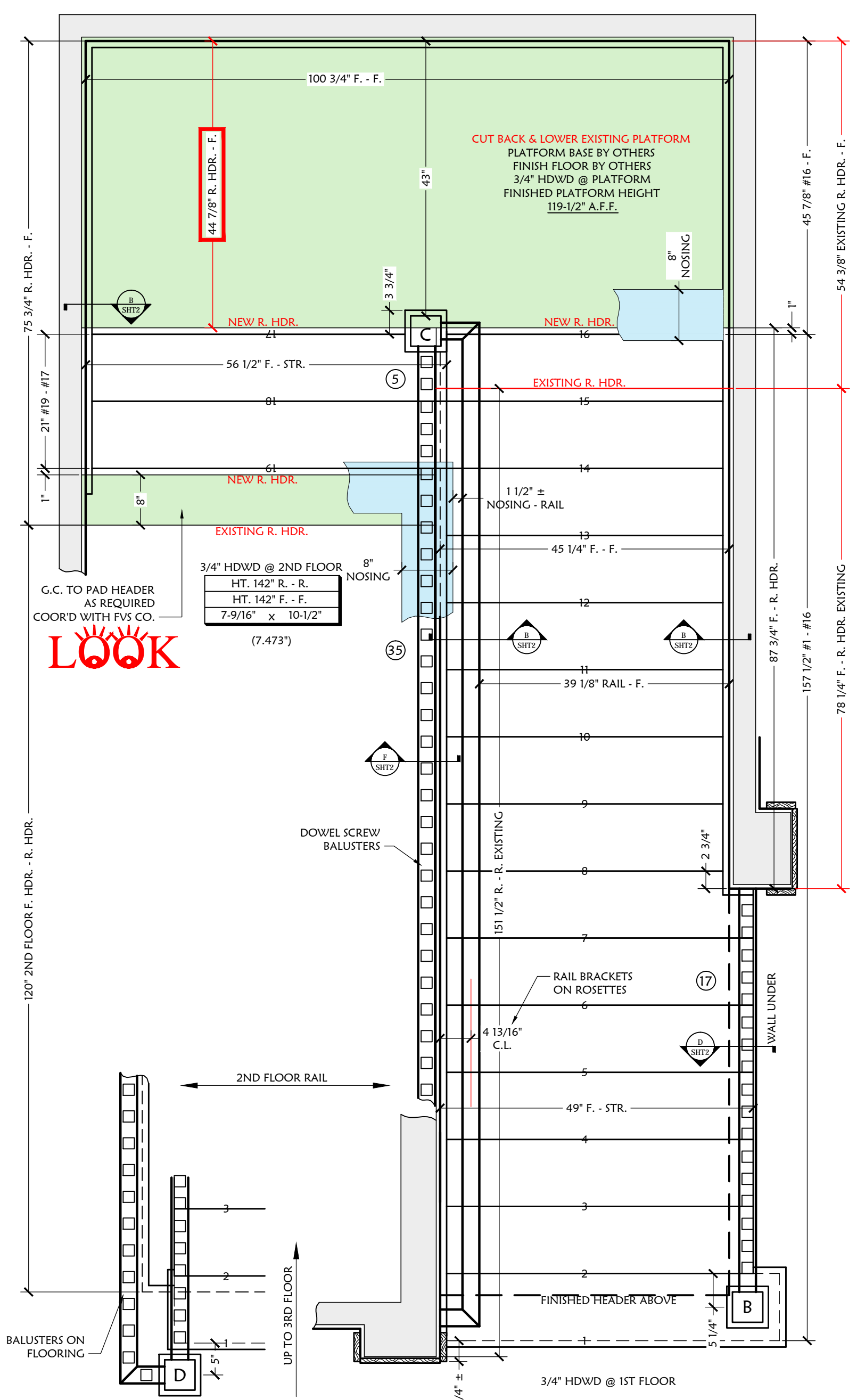
REVISION: BY: DATE: CHK BY: DATE:
REVISION: BY: DATE: CHK BY: DATE:
REVISION: BY: DATE: CHK BY: DATE:
REVISION: BY: DATE: CHK BY: DATE:



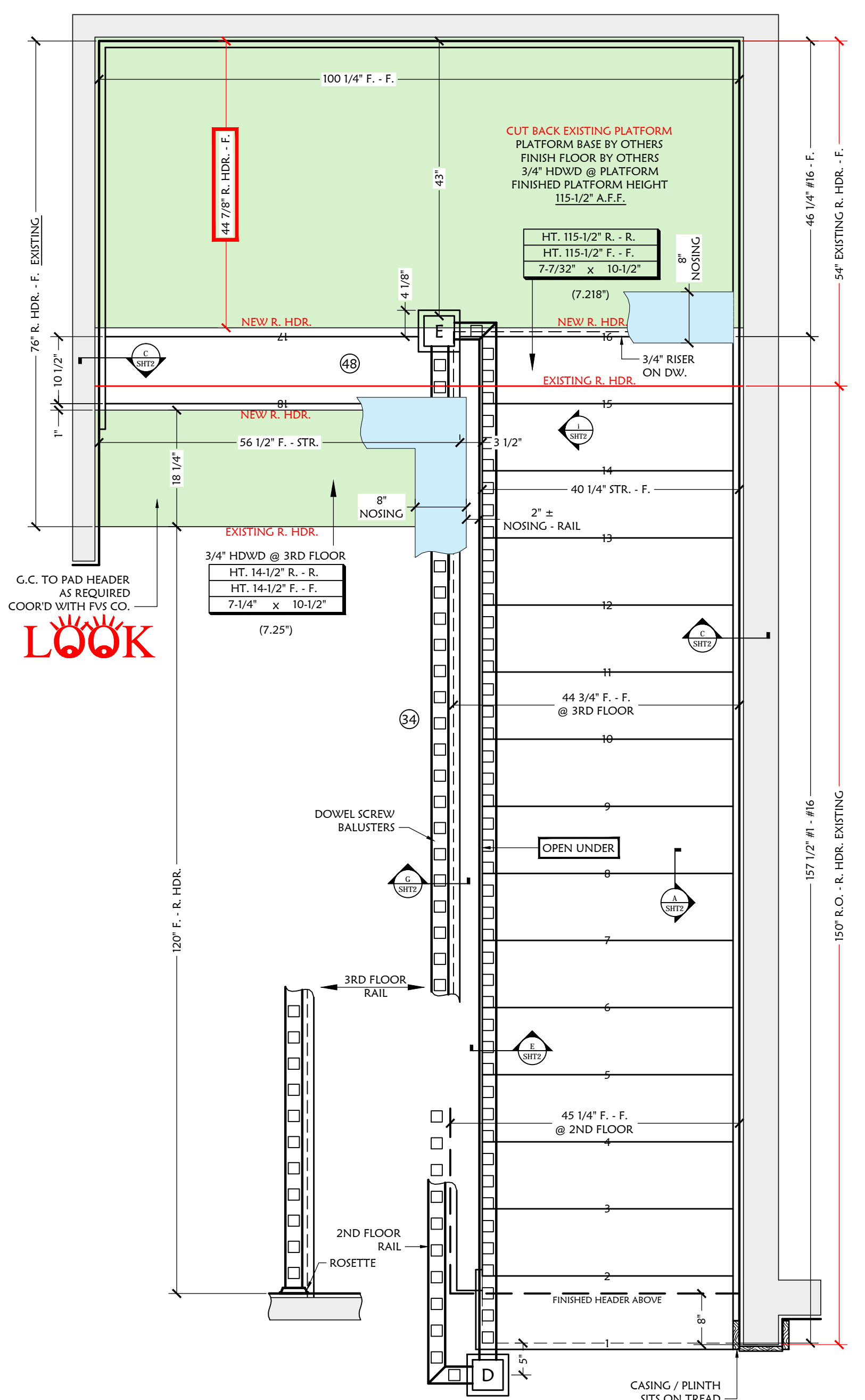
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BASEMENT TO 1ST FLOOR
SCALE: 3/4"=1'-0"

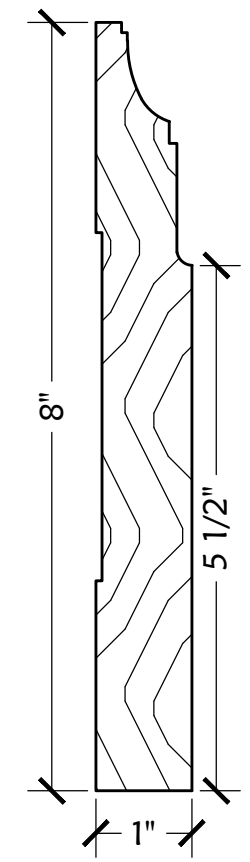


1ST TO 2ND FLOOR
SCALE: 3/4"=1'-0"

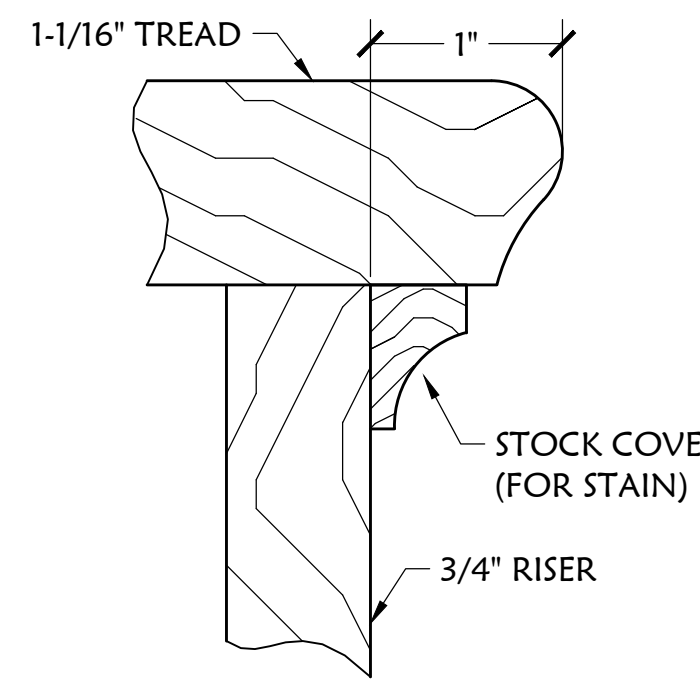


2ND TO 3RD FLOOR
SCALE: 3/4"=1'-0"

REAR STAIRS

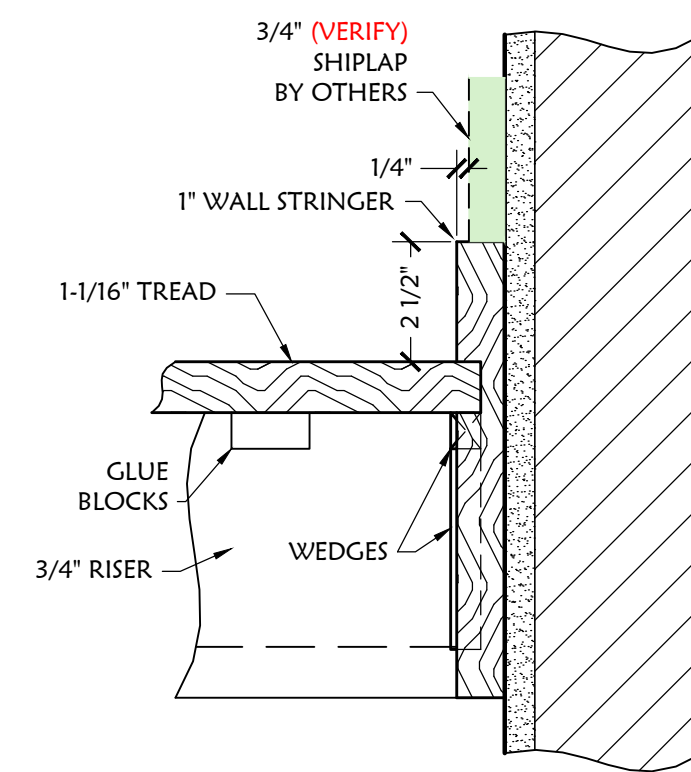


HOUSE BASE
SCALE: 6"=1'-0"



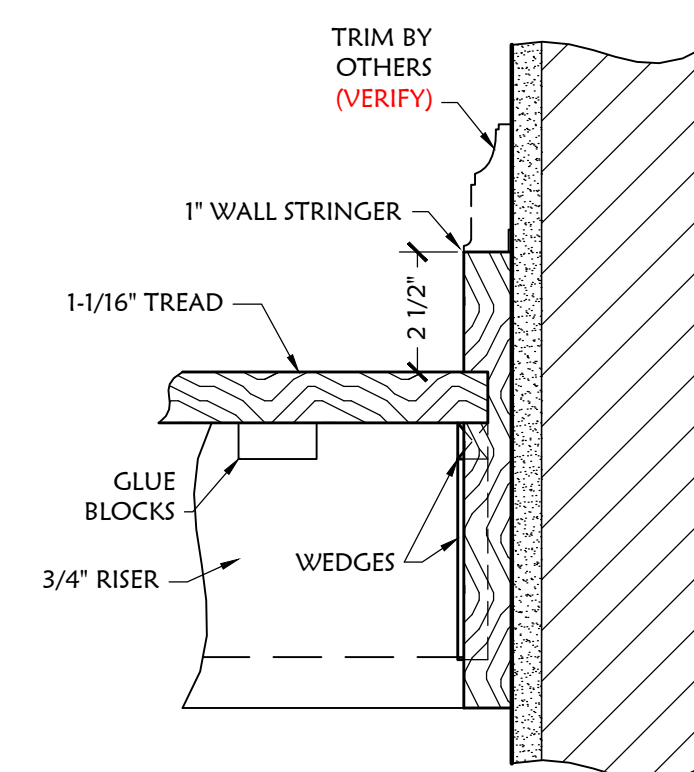
TREAD / RISER DETAIL
SCALE: FULL

A
SHT2



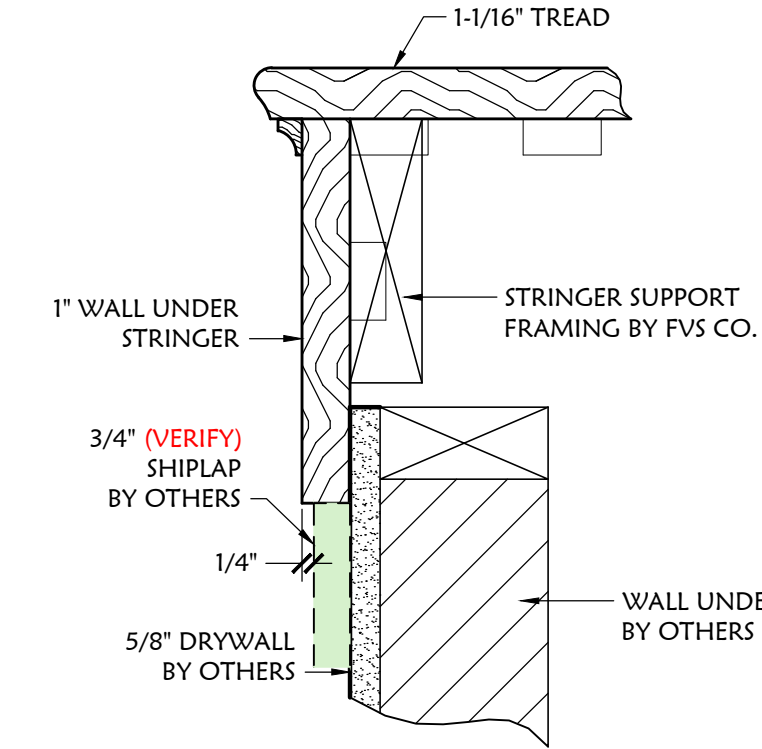
WALL STRINGER
SCALE: 3"=1'-0"
B-1 & 1-2 STAIRS

B
SHT2



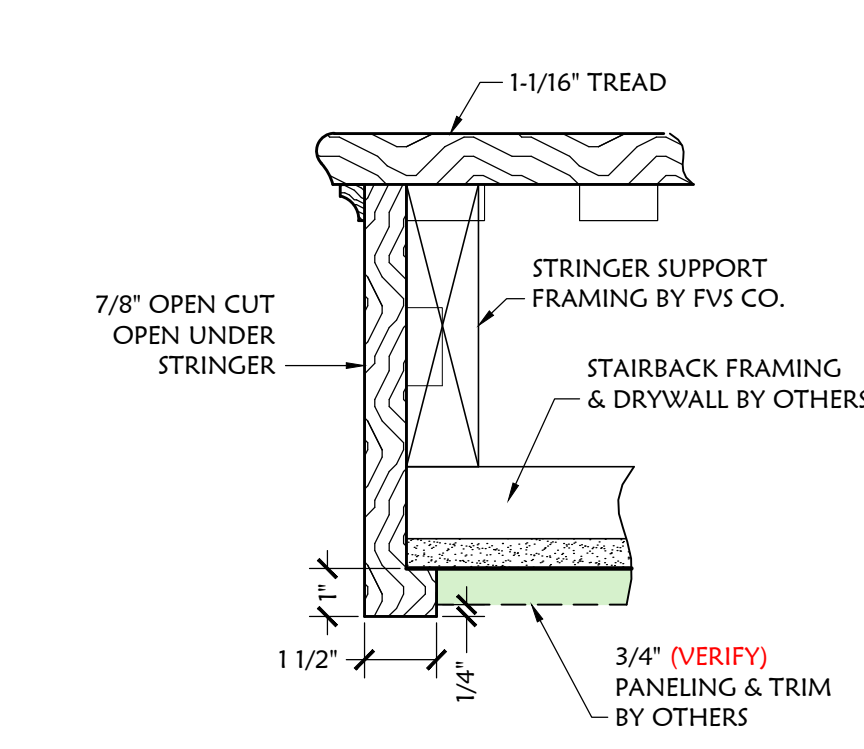
WALL STRINGER
SCALE: 3"=1'-0"
2-3 STAIR

C
SHT2



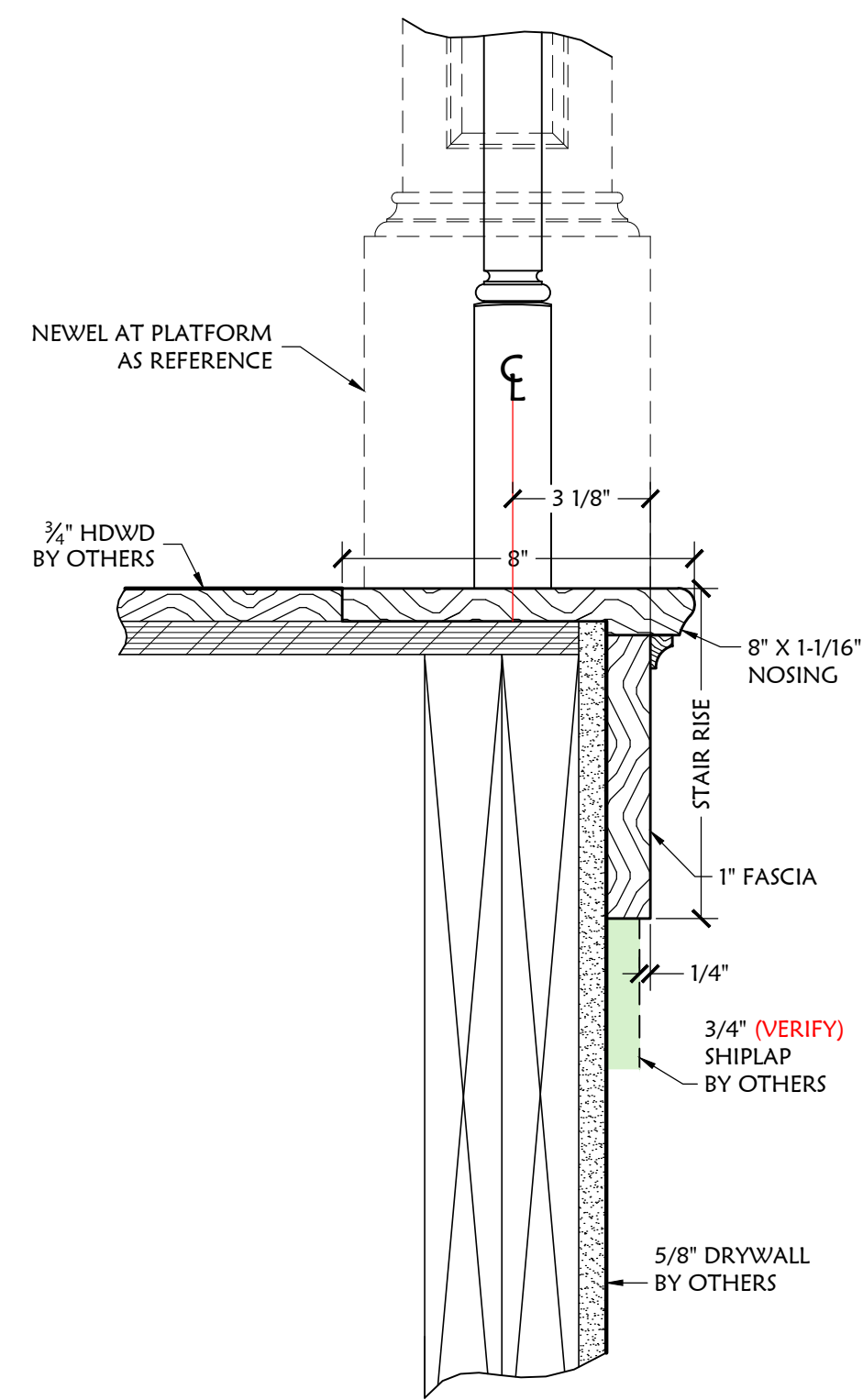
WALL UNDER STRINGER
SCALE: 3"=1'-0"
B-1 & 1-2 STAIRS

D
SHT2



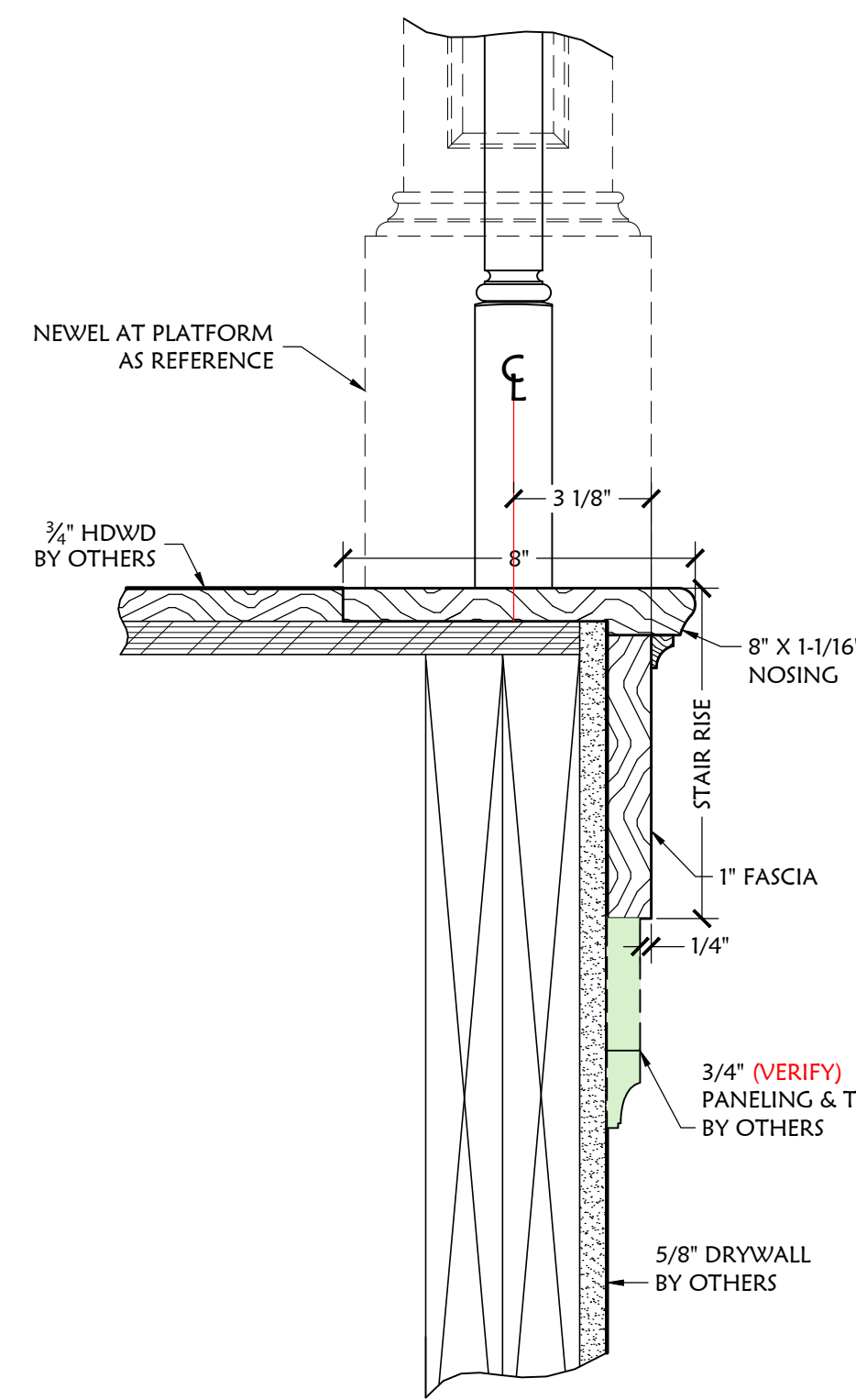
OPEN UNDER STRINGER
SCALE: 3"=1'-0"
2-3 STAIR

E
SHT2



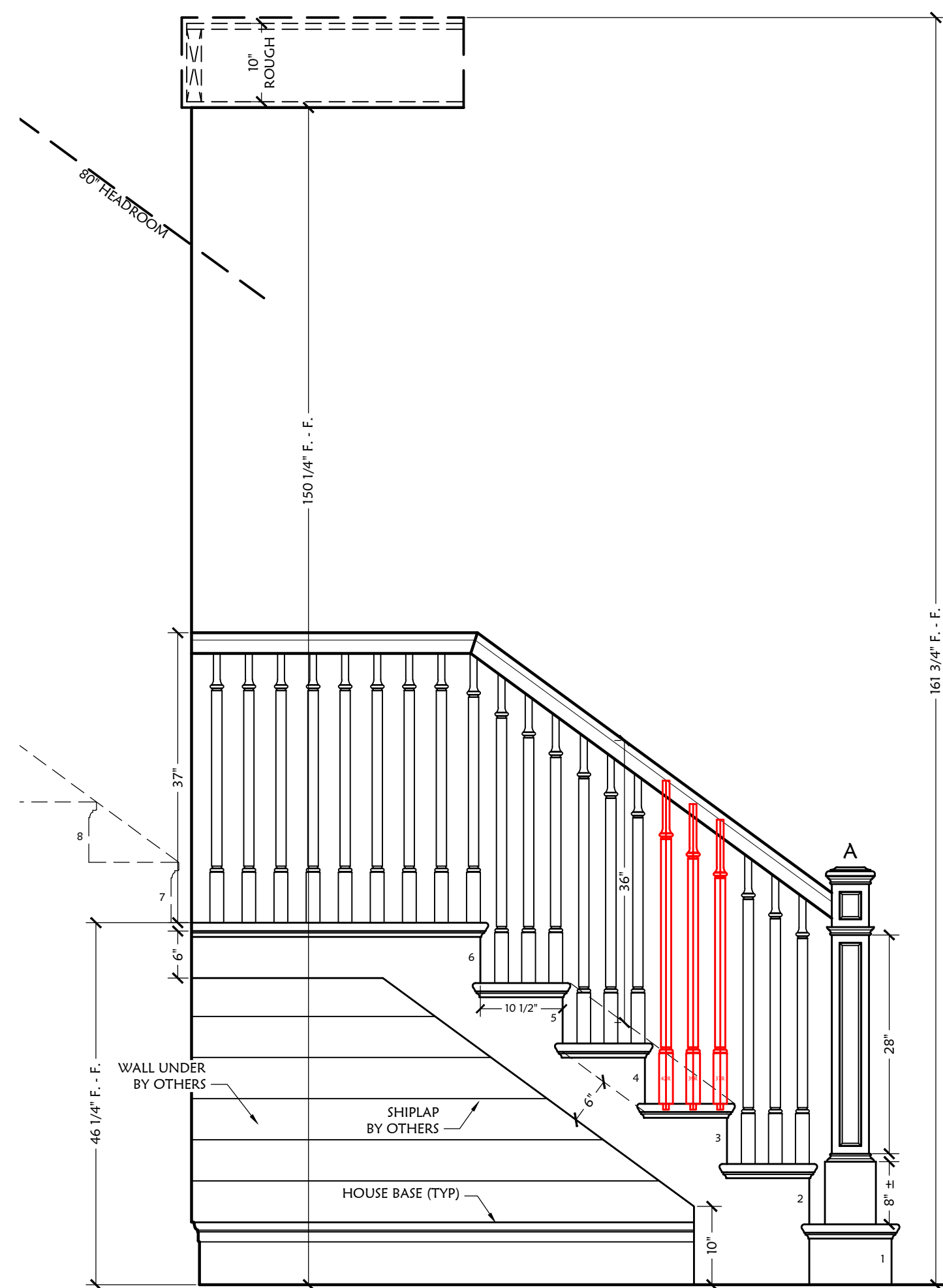
FLOOR TRIM
SCALE: 3"=1'-0"
2ND FLOOR

F
SHT2



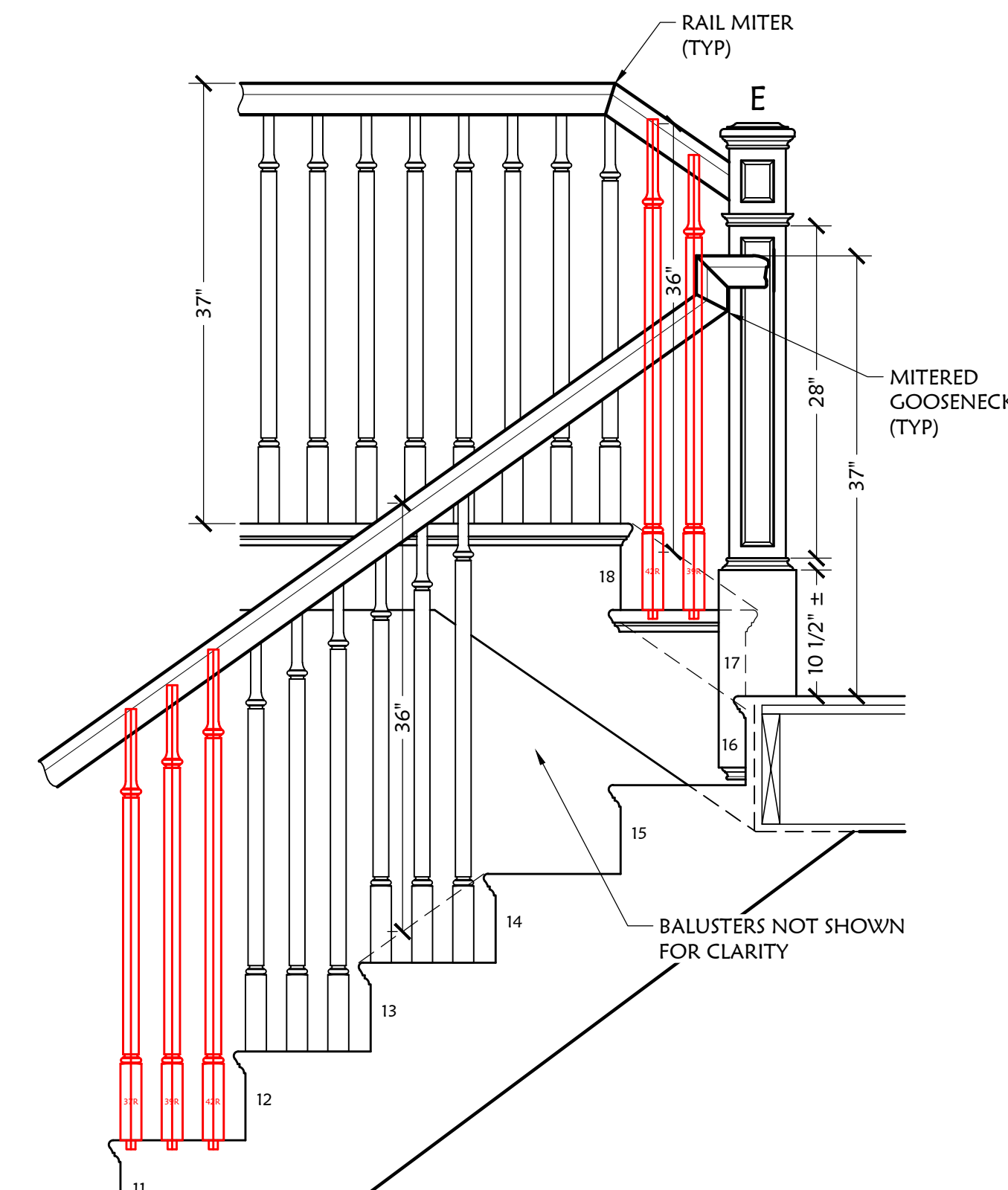
FLOOR TRIM
SCALE: 3"=1'-0"
3RD FLOOR

G
SHT2



BASEMENT ELEVATION
SCALE: 3/4"=1'-0"

H
SHT2



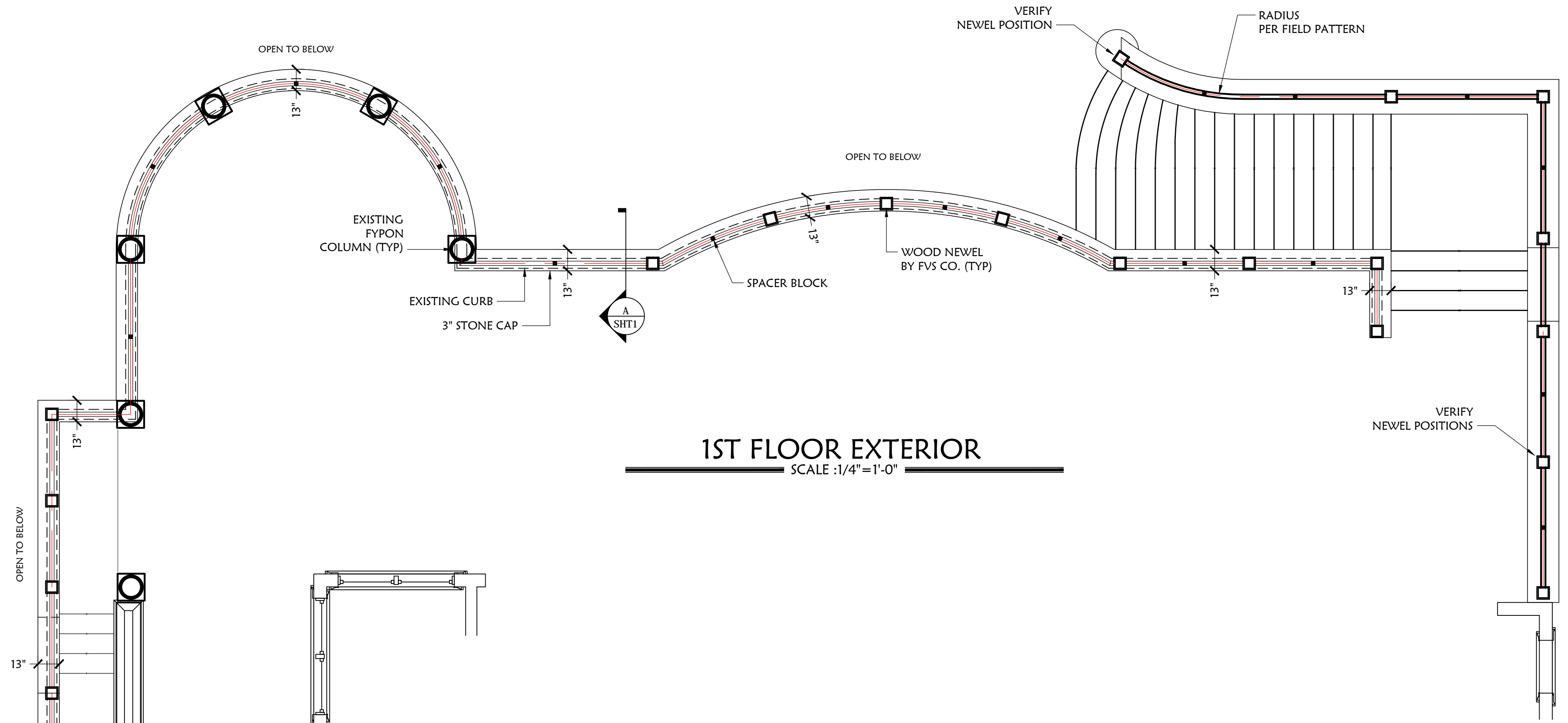
PLATFORM TRANSITION
SCALE: 3/4"=1'-0"
2-3 STAIR

I
SHT2

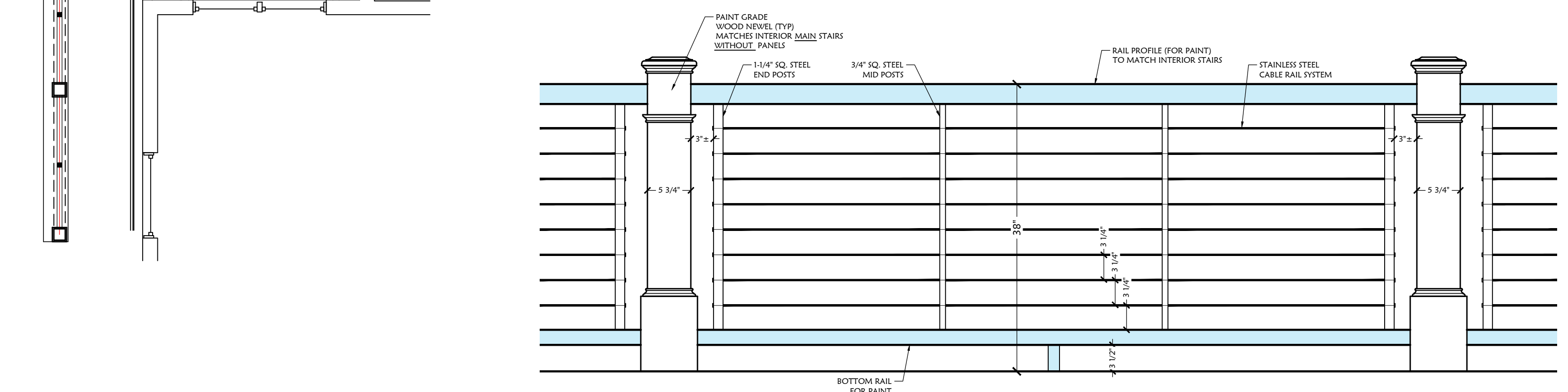


CONTRACTOR: _____
 JOB LOCATION: _____
 WILMETTE, IL
 OWNER: _____
 SCALE: AS SHOWN DRAWN BY: JIM J. DATE: _____
 PROJ MNGR: C.M.J. PROPOSAL #: 17078_TAG: 17078_R6
 DRAWING PATH: _____

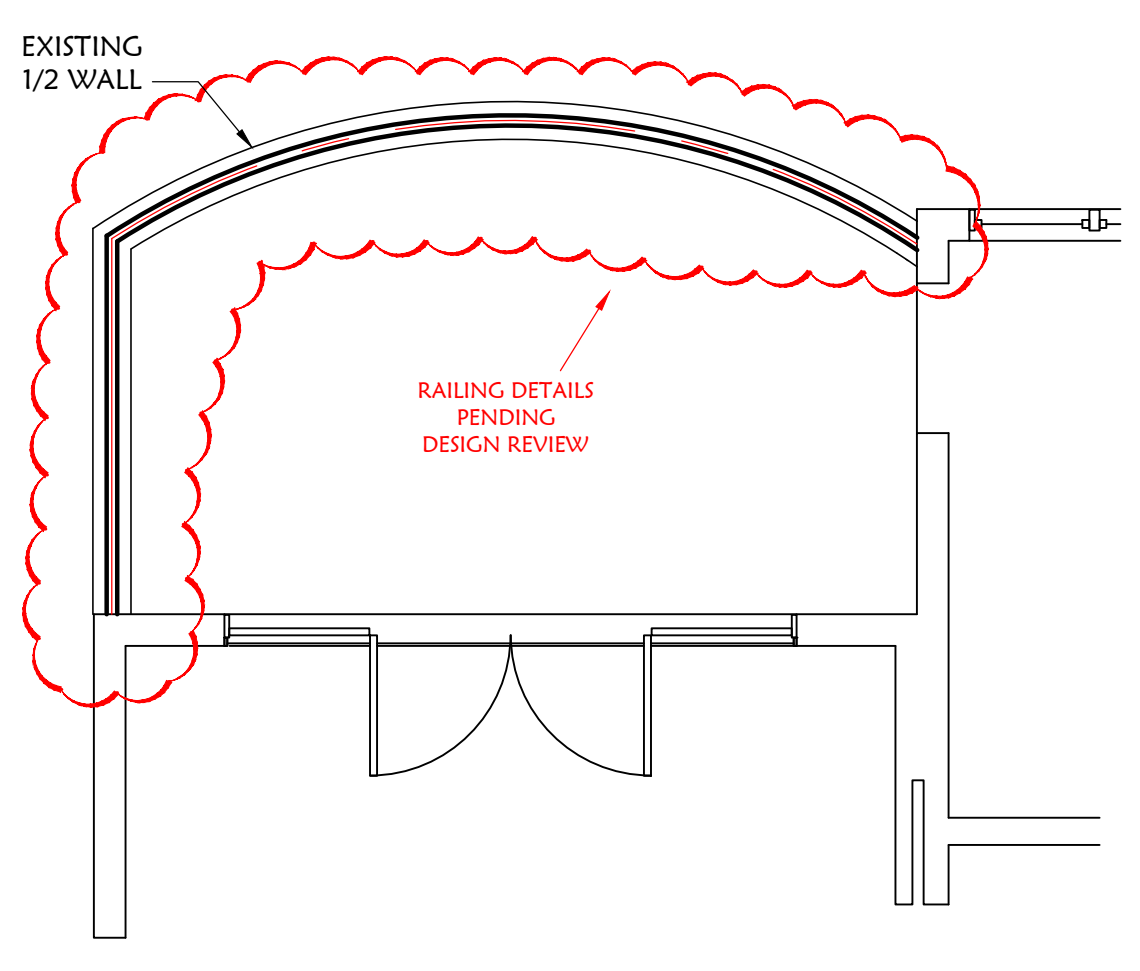
EXTERIOR BALUSTRADES



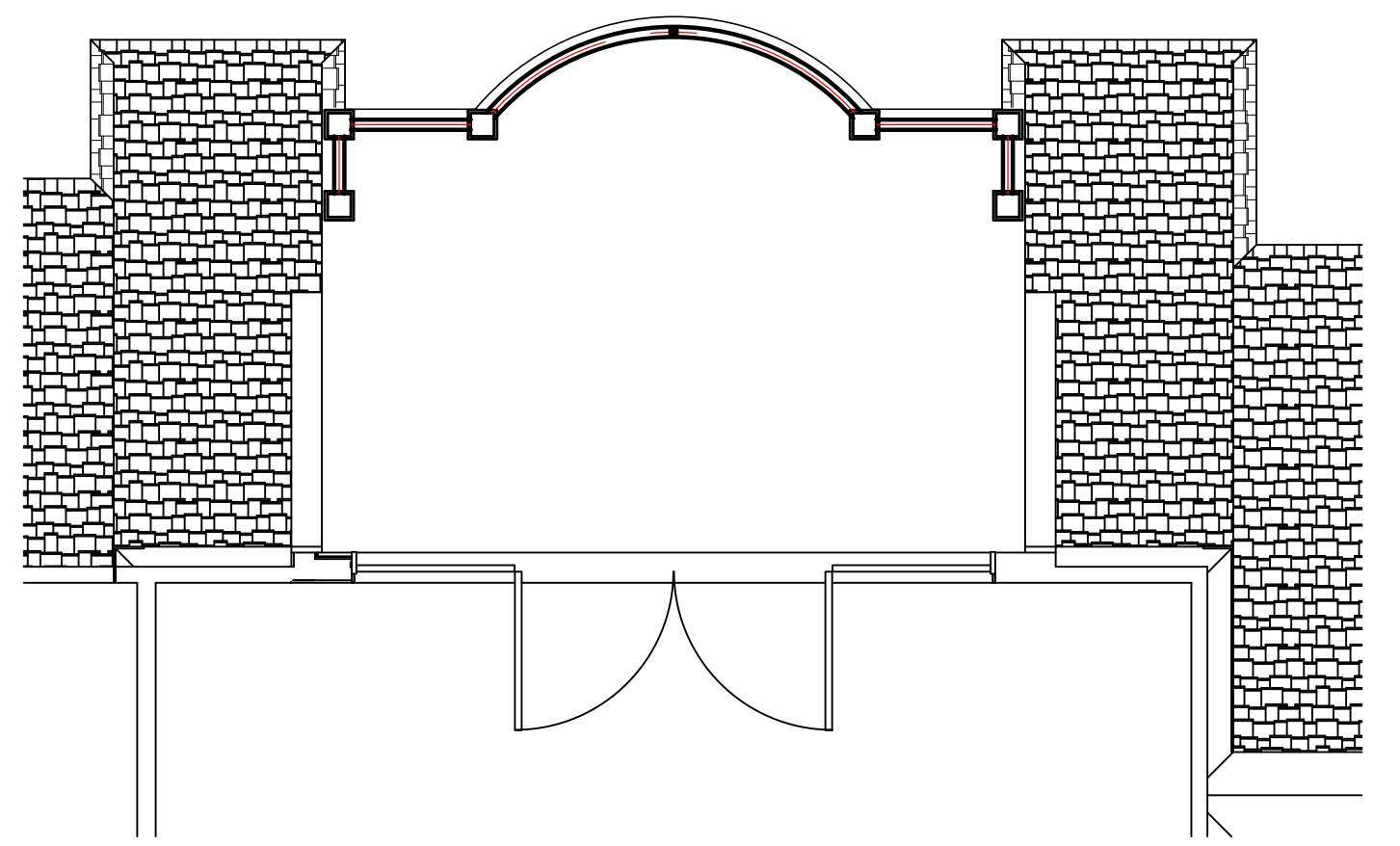
1ST FLOOR EXTERIOR
SCALE: 1/4" = 1'-0"



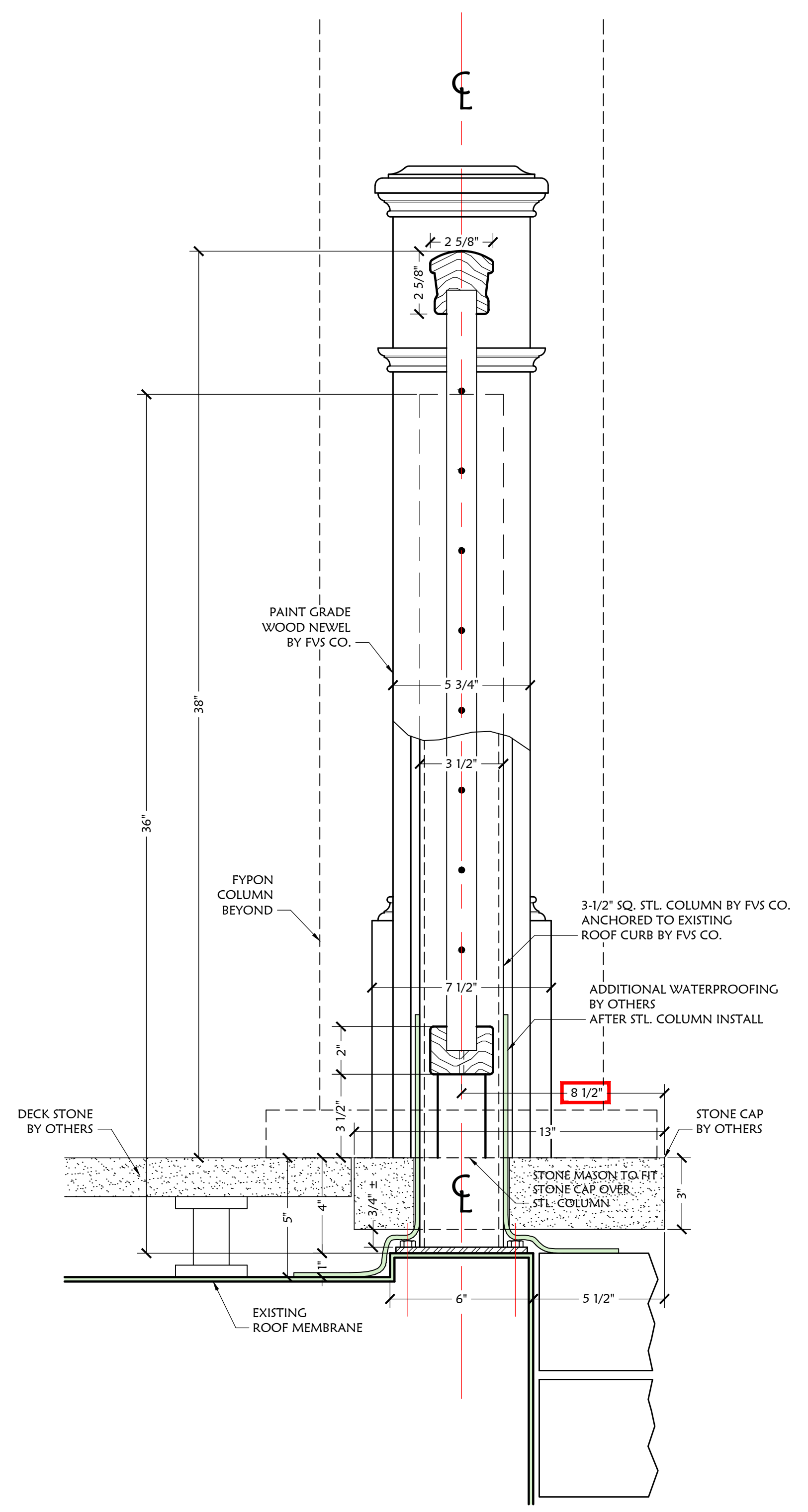
TYPICAL ELEVATION
SCALE: 1" = 1'-0" (B SHT1)



2ND FLOOR OFFICE
SCALE: 1/4" = 1'-0"



3RD FLOOR REC ROOM
SCALE: 1/4" = 1'-0"



SECTION THRU (TYP)
SCALE: 3" = 1'-0" (A SHT1)

SUPRT. COL: <u>STEEL</u>	BALUSTER / NEWEL PROFILE
NEWELS: <u>CYPRESS</u>	
RAILS: <u>CYPRESS</u>	
END POSTS: <u>STEEL - PWDR COAT</u>	
MID POSTS: <u>STEEL - PWDR COAT</u>	
CABLE: <u>STAINLESS STEEL</u>	
HARDWARE: <u>STAINLESS STEEL</u>	QTY.: <u>26</u>

JOB NUMBER <input type="checkbox"/> OFFICE COPY <input type="checkbox"/> STAIR SHOP <input type="checkbox"/> RAIL SHOP <input type="checkbox"/> C.N.C SHOP <input type="checkbox"/> INSTALLER CYPRESS STEEL STAINLESS STEEL	RAIL PROFILE 	BOTTOM RAIL PROFILE
--	------------------	-------------------------

Project Manager: _____ Date: _____	Checked by: _____ Date: _____
Accounting Approval: _____ Date: _____	Checked by: _____ Date: _____
Approved for Production: _____ Date: _____	Checked by: _____ Date: _____

GENERAL NOTES:
 BUILDING CODE:
 INSTALLER NOTE:

CONTRACTOR: _____ FAX #: _____
 CONTACT: _____ MOBIL #: _____
 JOB LOCATION: _____ WILMETTE, IL
 OWNER: _____
 PHONE #: _____ MOBIL#: _____
 ARCHITECT: _____
 CONTACT/DESIGNER: _____ FAX #: _____
 SUPERINTENDENT: _____
 OFFICE #: _____ MOBIL #: _____
 SCALE: AS SHOWN DRAWN BY: JIM J. DATE: _____
 PROJ.MNGR: C.M.J. PROPOSAL #: 17078 TAG: 17078 R9 EXTERIOR

REVISION: _____ BY: _____ DATE: _____	CHK BY: _____ DATE: _____
REVISION: _____ BY: _____ DATE: _____	CHK BY: _____ DATE: _____
REVISION: _____ BY: _____ DATE: _____	CHK BY: _____ DATE: _____
REVISION: _____ BY: _____ DATE: _____	CHK BY: _____ DATE: _____

JOB LOCATION MAP:

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