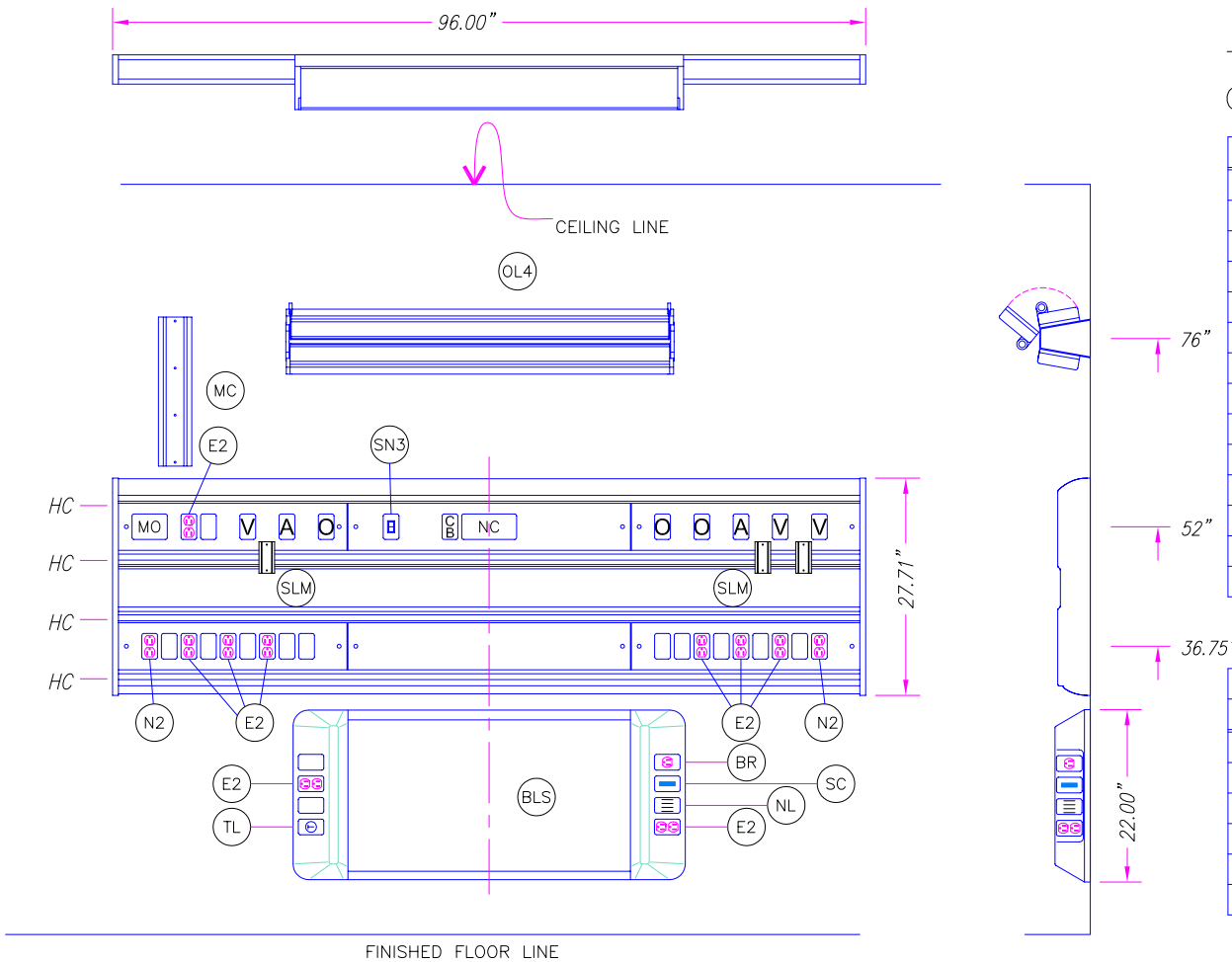


AMICO HORIZONTAL MEDICAL WALL SYSTEM MAJESTIC SERIES 2
 TWO TIER with NO CHASE
 (M/N: HW00-M-02T-096)



TYPE: _____
 QUANTITY: _____

SYMBOL	QTY.	DESCRIPTION
HC	4	HORIZONTAL CHANNEL
E2	7	DUPLEX RECEPTACLE - RED
N2	2	DUPLEX RECEPTACLE - IVORY
SN3	1	LIGHT SWITCH, MOMENTARY
OL4	1	OVERBED LIGHT NOMINAL 4 FT.
LVC	1	LOW VOLTAGE CONTROLLER
NC	1	NURSE CALL PROVISION *
CB	1	CODE BLUE PROVISION
MO	1	MONITOR PROVISION
SLM	3	VACUUM SLIDE C/W MOUNT
MC	1	MONITOR CHANELL ONLY
A	2	GAS, AIR
V	3	GAS, VACUUM
O	3	GAS, OXYGEN

BED LOCATOR SYSTEM DETAILS		
SYMBOL	QTY.	DESCRIPTION
BR	1	BED RECEPTACLE - IVORY
E2	2	DUPLEX RECEPTACLE - RED
NL	1	NIGHT LIGHT
TL	1	TELEPHONE PROVISION
SC	1	SIDE COM RECEPTACLE-37 PIN JACK

IMPORTANT: PLEASE VERIFY THAT THE ABOVE INFORMATION IS CORRECT, AND PROVIDE THE REMAINING INFORMATION.

APPROVAL SIGNATURE _____ DATE _____ PHONE NO. _____

AMICO Corporation
 85 Fulton Way
 Richmond Hill, Ontario
 L4B 2N4, CANADA
 Toll-Free: 1-877-462-6426
 Tel: (905) 764-0800
 Fax: (905) 764-0862
 www.amico.com

HOSPITAL _____
 LOCATION _____
 QTY. (_____) TYPE _____ UNITS AS SHOWN / (_____) TYPE _____ UNITS OPPOSITE

TYPICAL DRAWING

A. NURSE CALL MFGR: _____ MODEL NO.: _____
 B. MEDICAL GAS MFGR.: _____ TYPE CONNECTION: _____
 C. FINISH: _____ CEILING HEIGHT: _____

DRWG. NO. 030911-C03
 DRAWN BY: CE
 CHECKED BY: CS
 REV. NO.: 00
 DATE: 09/11/03