



INSTITUTE OF EDUCATION - LEVEL 4

Rev.	Description	By	Date	Chk'd	Auth
		IOE			
P1	FOR INFORMATION/COMMENT				
Rev.	Purpose of issue	Date		Authorised	

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Client **ESTATES AND FACILITIES**

Project
LEVEL 04 REFURBISHMENT

Title	ALL ROOMS
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Original Scale	Drawn	Checked	Authorised
	Date	Date	Date

Drawing Number	Rev
IOE4	P1

A3