



REVISIONS	
REV #	DESCRIPTION



CITY OF OREGON CITY
PUBLIC WORKS DEPARTMENT
APPROVAL

SIGNATURE _____
NAME: _____
DATE: _____
APPROVAL EXPIRES IF LAPSE
IN CONSTRUCTION EXCEEDS 6
MONTHS AFTER DATE ABOVE

PRINTED: MM/DD/YYYY

OC RECORD DRAWING #:
XXXXXX.XX

DRAWING NUMBER:

X1
SHEET 1 OF X

PROJECT INFORMATION
(3 LINES
PROVIDED)
OC PROJECT #:
PROJECT NAME
SHEET TITLE

(CONSULTANT'S INFO AREA)
INCLUDE (AT MINIMUM) THE
FOLLOWING INFORMATION:
COMPANY/CONSULTANT NAME
ADDRESS
CONTACT INFORMATION
DESIGNED BY:
DRAWN BY: