



DCAMM

DIVISION OF CAPITAL ASSET MANAGEMENT & MAINTENANCE

OFFICE OF PLANNING DESIGN & CONSTRUCTION

McCormack Building
One Ashburton Place - Room 1500
Boston, MA 02108

617-727-4050
www.mass.gov/dcamm

KEYPLAN

Project Name:

XXXXXXXXXXXX
XXXXXXXXXXXX

DCAMM Project Number
AAA0000-DC1

Project Location

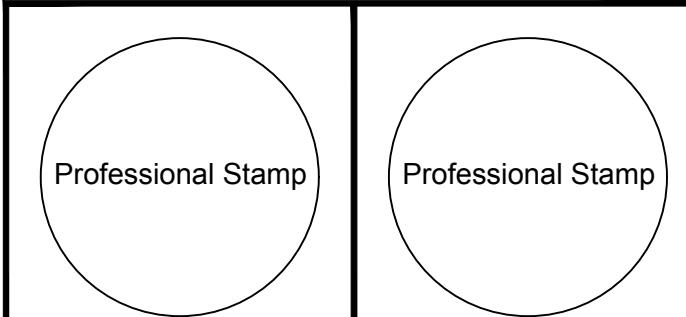
XXXXXXXXXXXX
XXXXXXXXXXXX

Project Architect
This box must contain the principal designer's name and phone number. It may also contain a logo, address and website address.

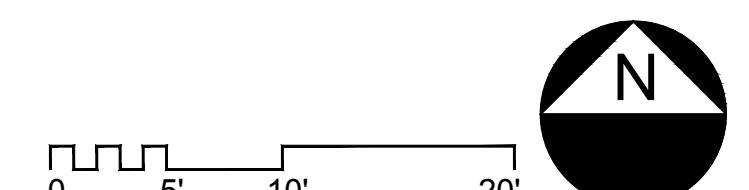
The designer's in-house project number must be provided.

Project Consultant

This box is to contain the appropriate consultant's name and phone number. It may also contain a logo, address and website address.



Site Number: XXXXXXXXXX
CAMIS Number: XXXXXXXXXX
Building Number: XXXXXXXXXX
Secretariat: XXXXXXXXXX



Note to Designers: ALL drawings are to have graphic scales and north arrows as appropriate. If several drawings of different scales are shown, EACH is to have a specific graphic scale.

Original Issue Date
MM - DD - YYYY

Revisions
No. Description Date
XX XXXXXXXXXXXXXXXX MM/DD/YY
XX XXXXXXXXXXXXXXXX MM/DD/YY

Plan Name:
XXXXXXXXXXXX
XXXXXXXXXXXX

Drawing Number:
00-000
Drawing 000 of 00000

Green text can be edited by designer
Red text is permanent