

- approved
- approved as noted
- not approved revise as noted

authorized signature \_\_\_\_\_ date \_\_\_\_\_

Custom Receptacle

No. AT-2320

(nch)



Date 2/11/14

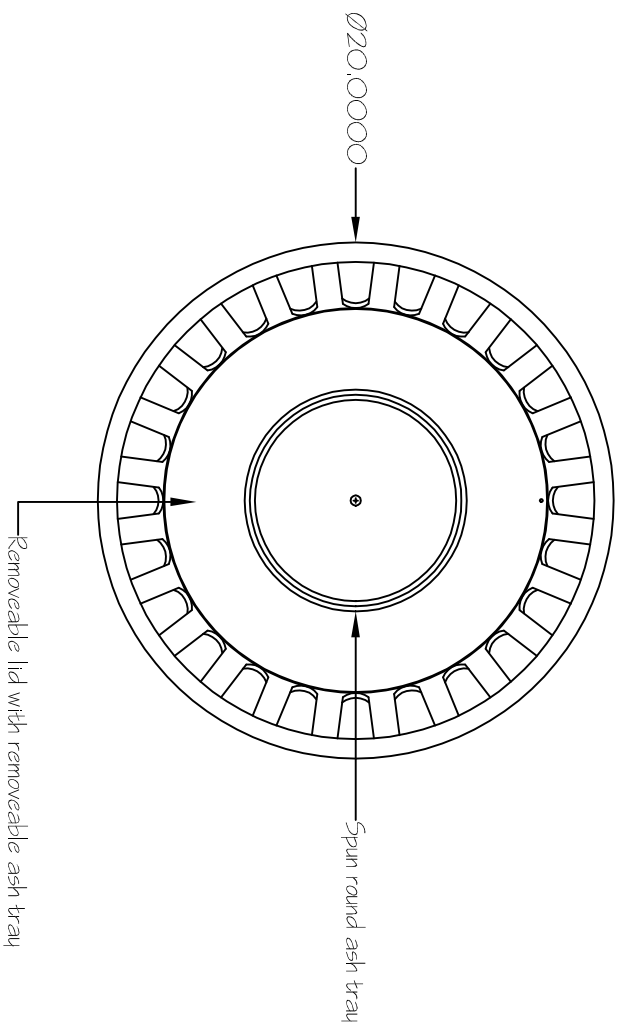
Scale N.T.S.

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\*Revised 2/11/14

Top View



Front Elevation

