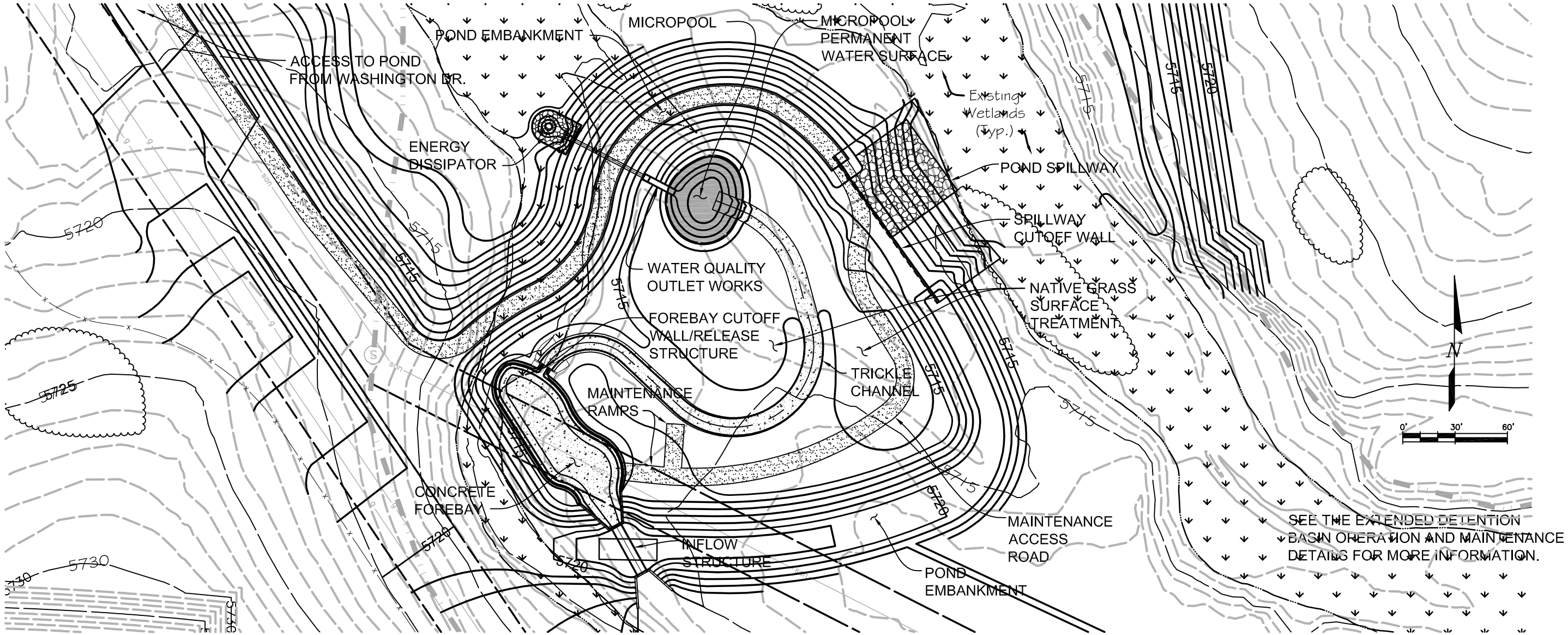

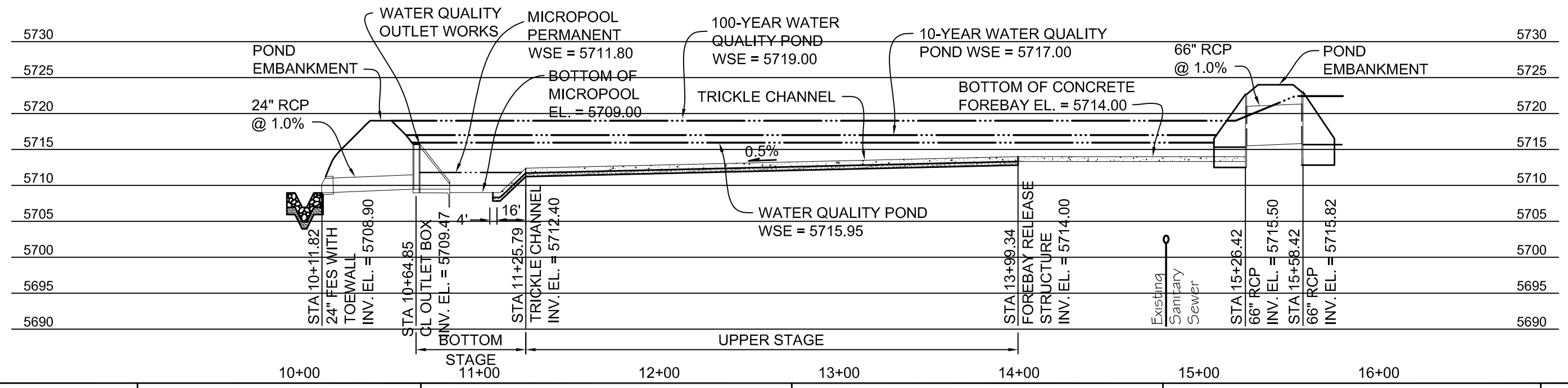

DESIGNED: DATE: DRAWN: DATE: CHECKED: DATE: REVISED: DATE: REVISED: DATE:	**DRAINAGE SPECIALTY** 123 MAIN ST SOMEPLACE, CO 81234 (123) 456-7890		**PROJECT NAME**	**EXTENDED DETENTION BASIN OPERATION AND MAINTENANCE PLAN (PLAN AND PROFILE)**	SHEET ____ OF ____