

This Space For Architect/Engineer Approval

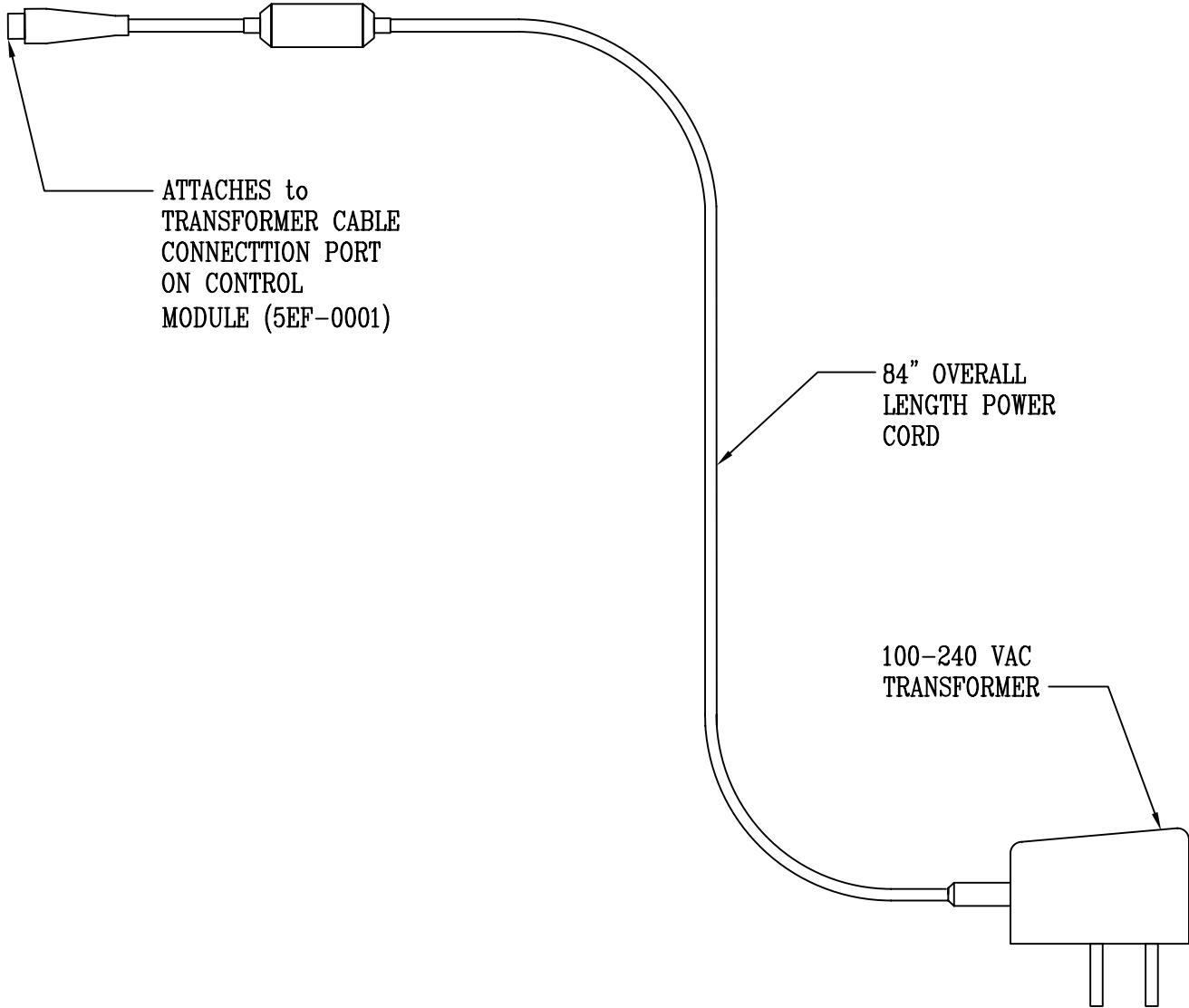
Job Name \_\_\_\_\_ Date \_\_\_\_\_

Model Specified \_\_\_\_\_ Quantity \_\_\_\_\_

Customer/Wholesaler \_\_\_\_\_

Contractor \_\_\_\_\_

Architect/Engineer \_\_\_\_\_



MODEL NUMBER 5EF-0002

DATE 3/21/06

SCALE NTS

DRAWN DHL

CHECKED WJS

APPROVED JHB



DESCRIPTION

ELECTRONIC FAUCET: AC TRANSFORMER REPLACEMENT PART

equip Foodservice Accessories  
P.O. BOX 1088, 2 SADDLEBACK COVE  
TRAVELERS REST, SOUTH CAROLINA 29690  
PHONE: 800.891.4808 FAX: 800.868.0084