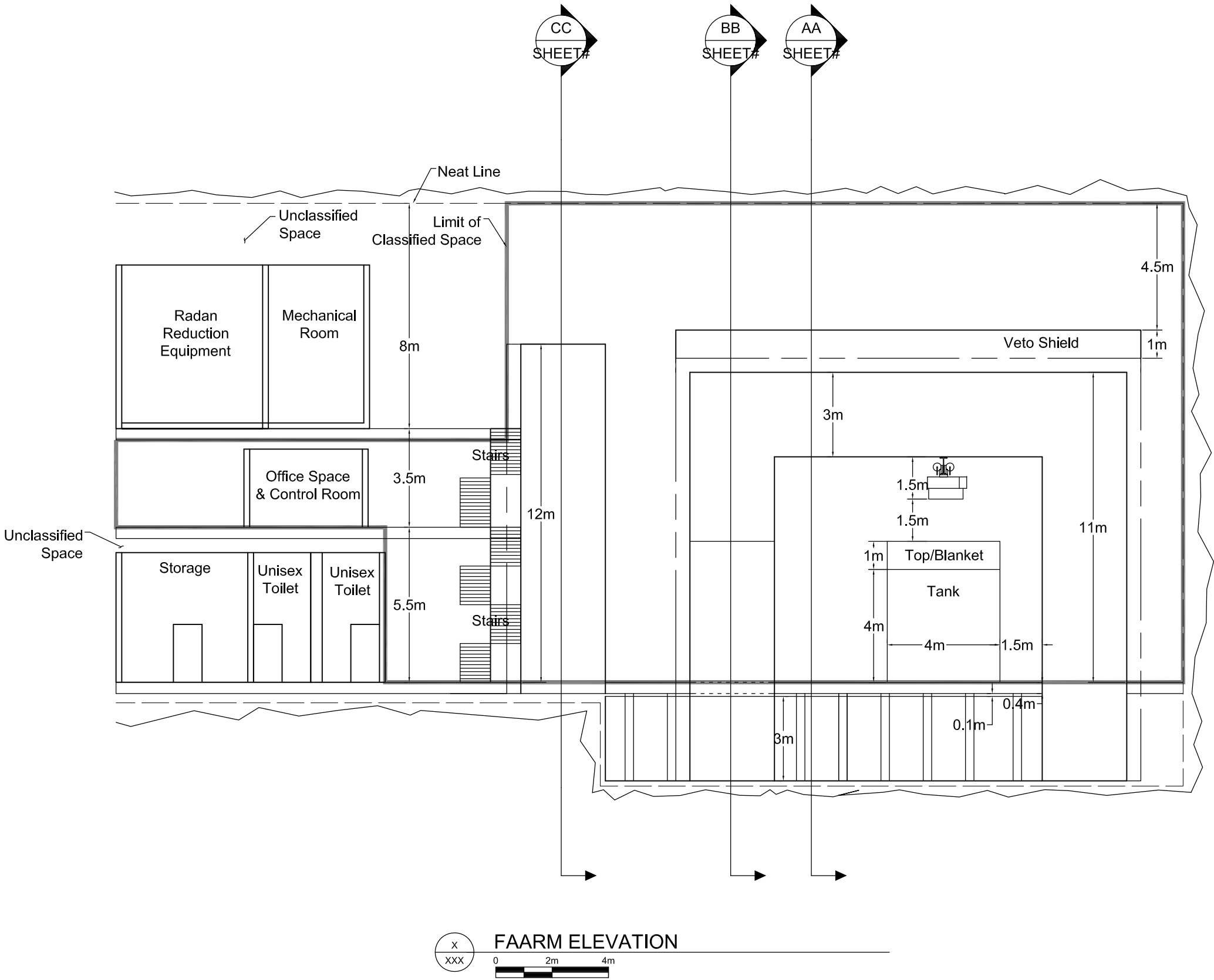




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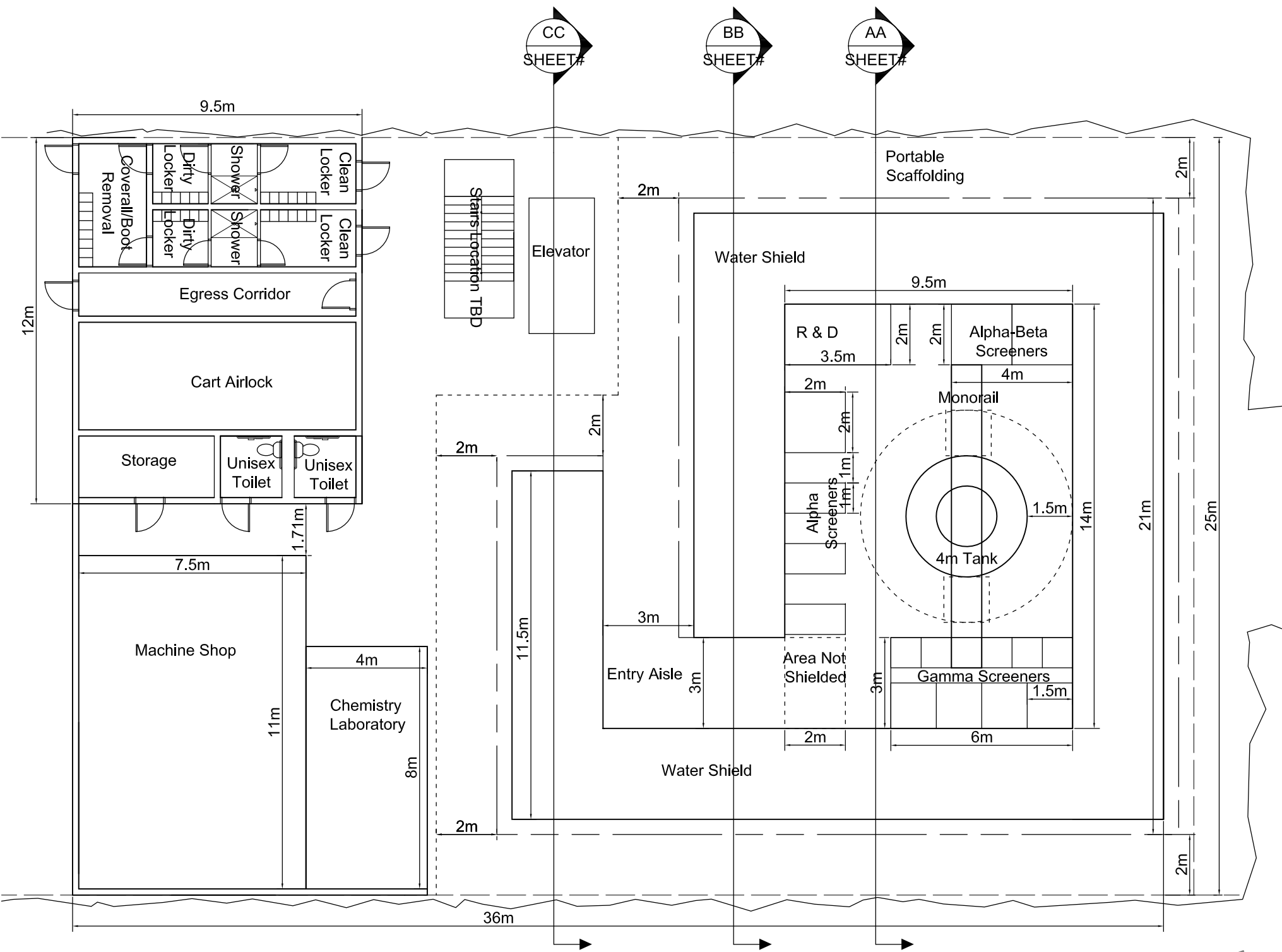
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FAARM FIRST FLOOR PLAN

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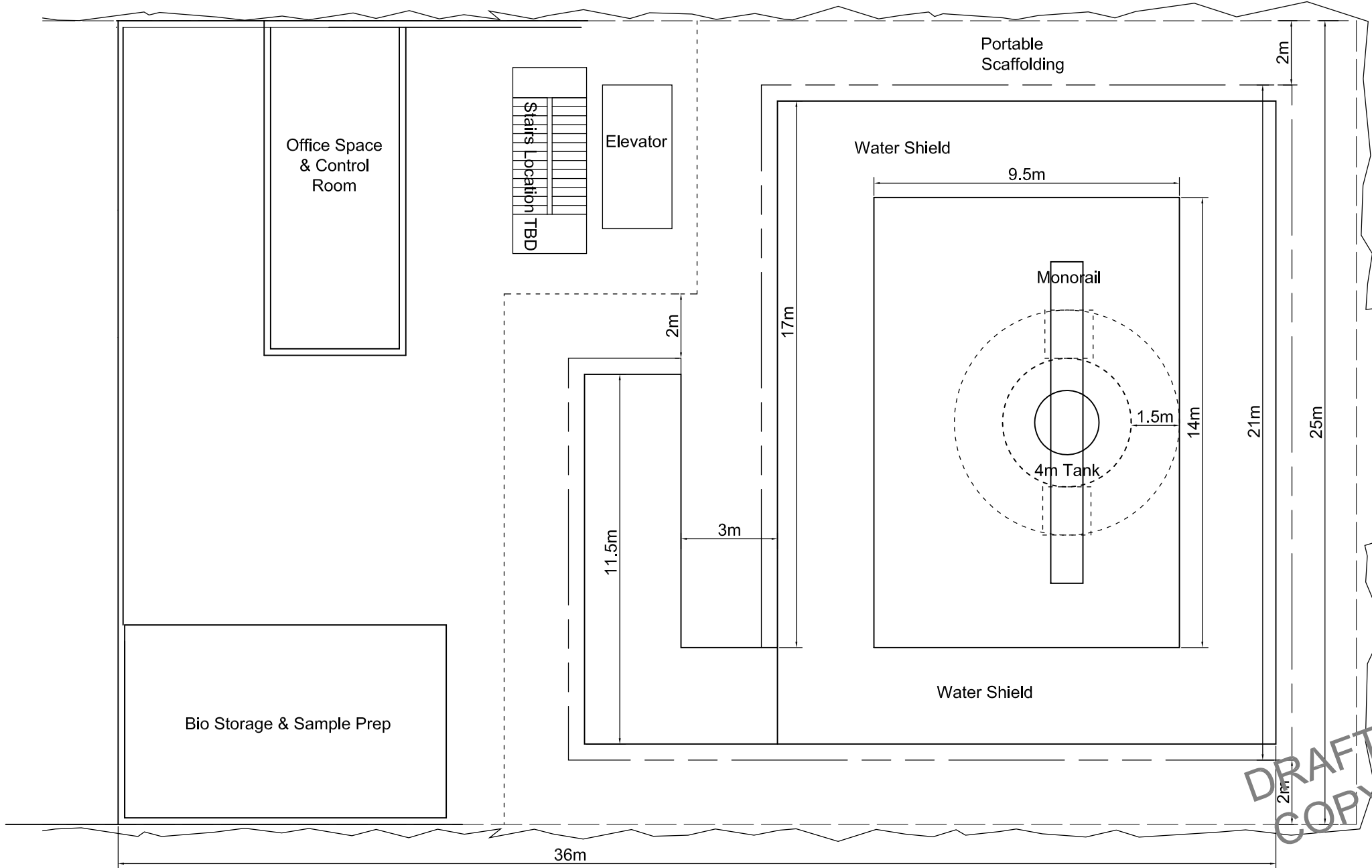
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FAARM SECOND FLOOR PLAN

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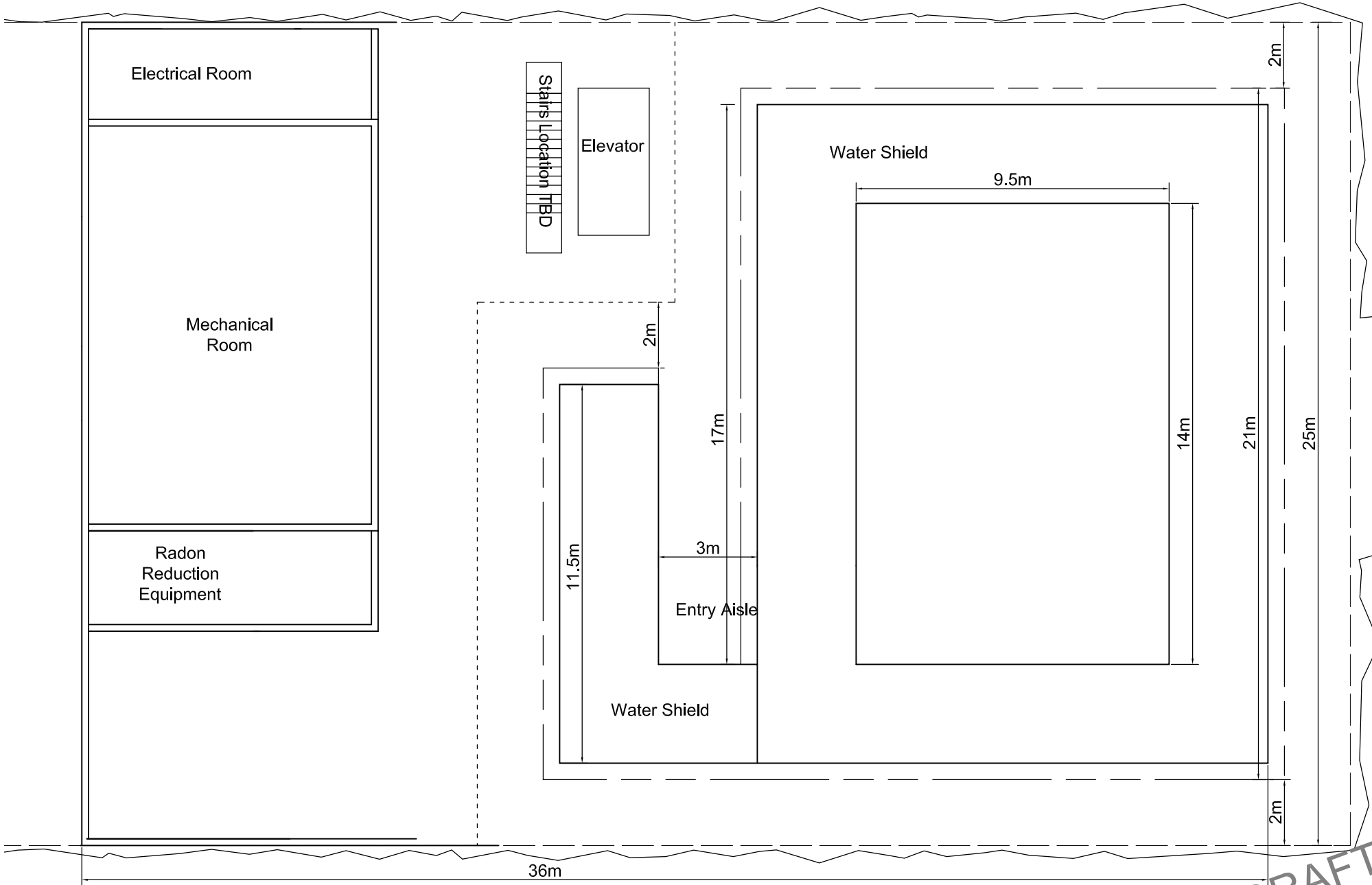
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FAARM THIRD FLOOR PLAN

Signature

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Name

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Date

X

License #

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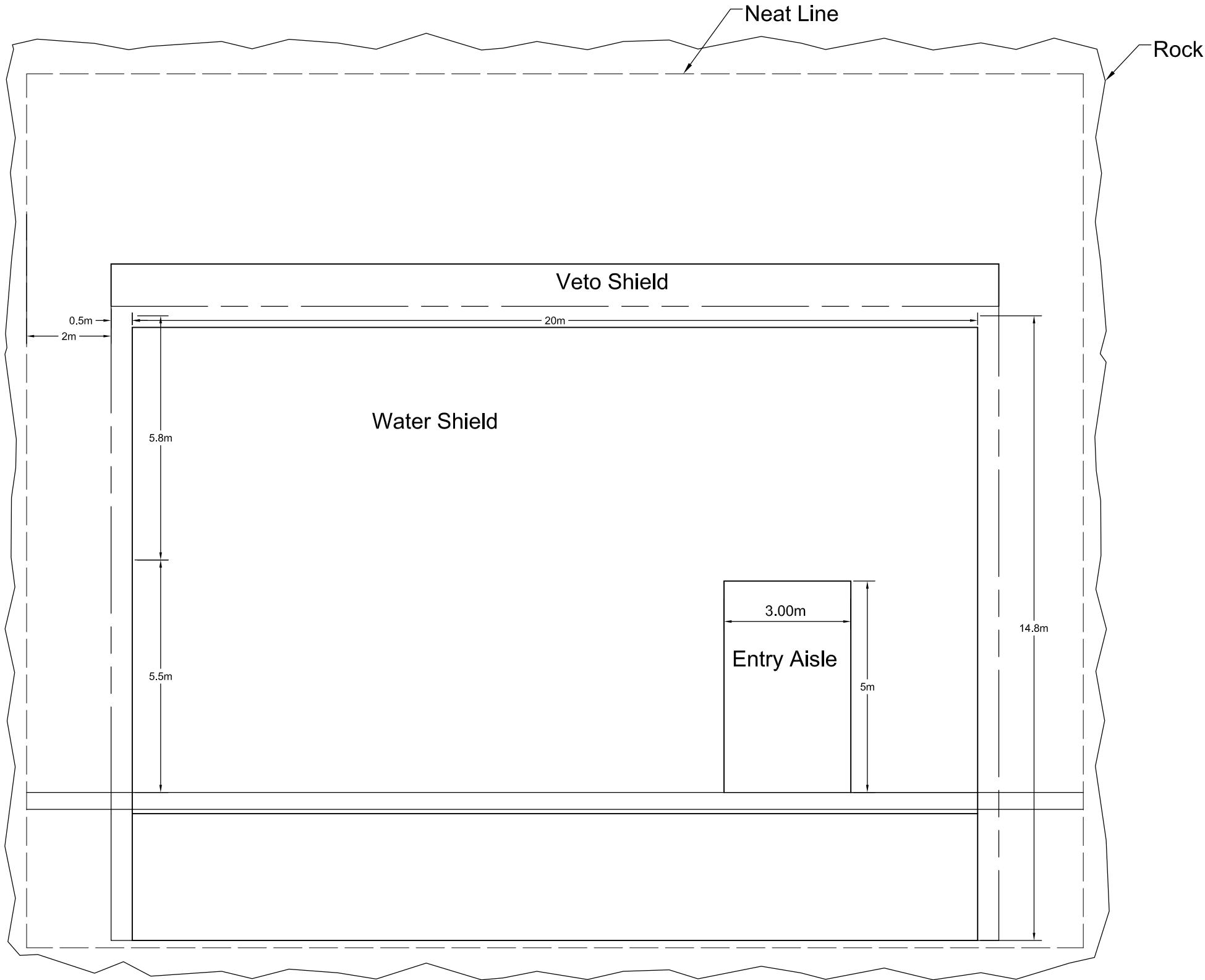
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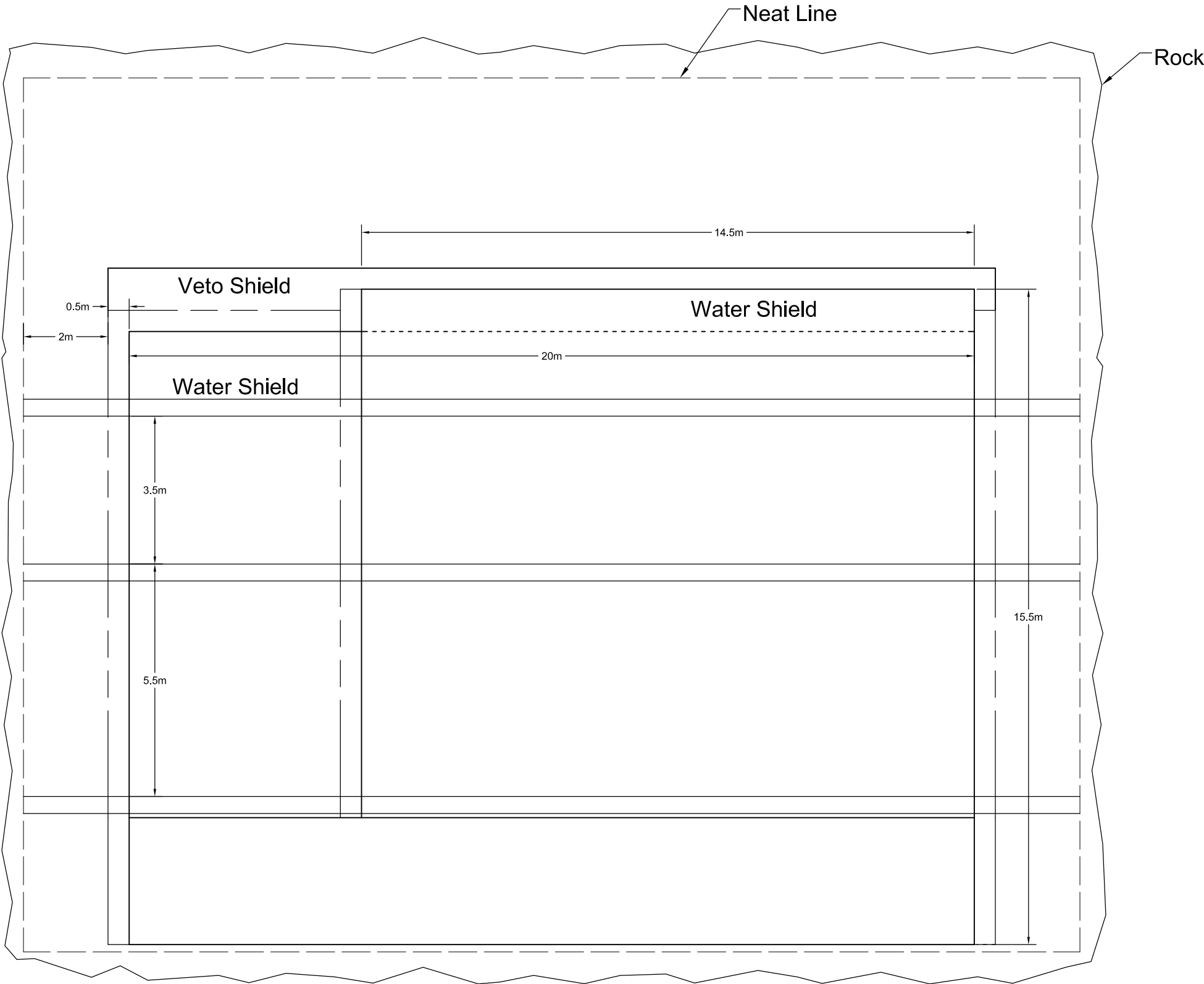
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