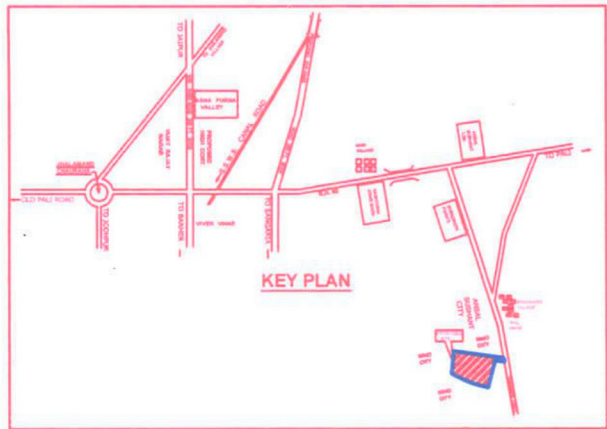
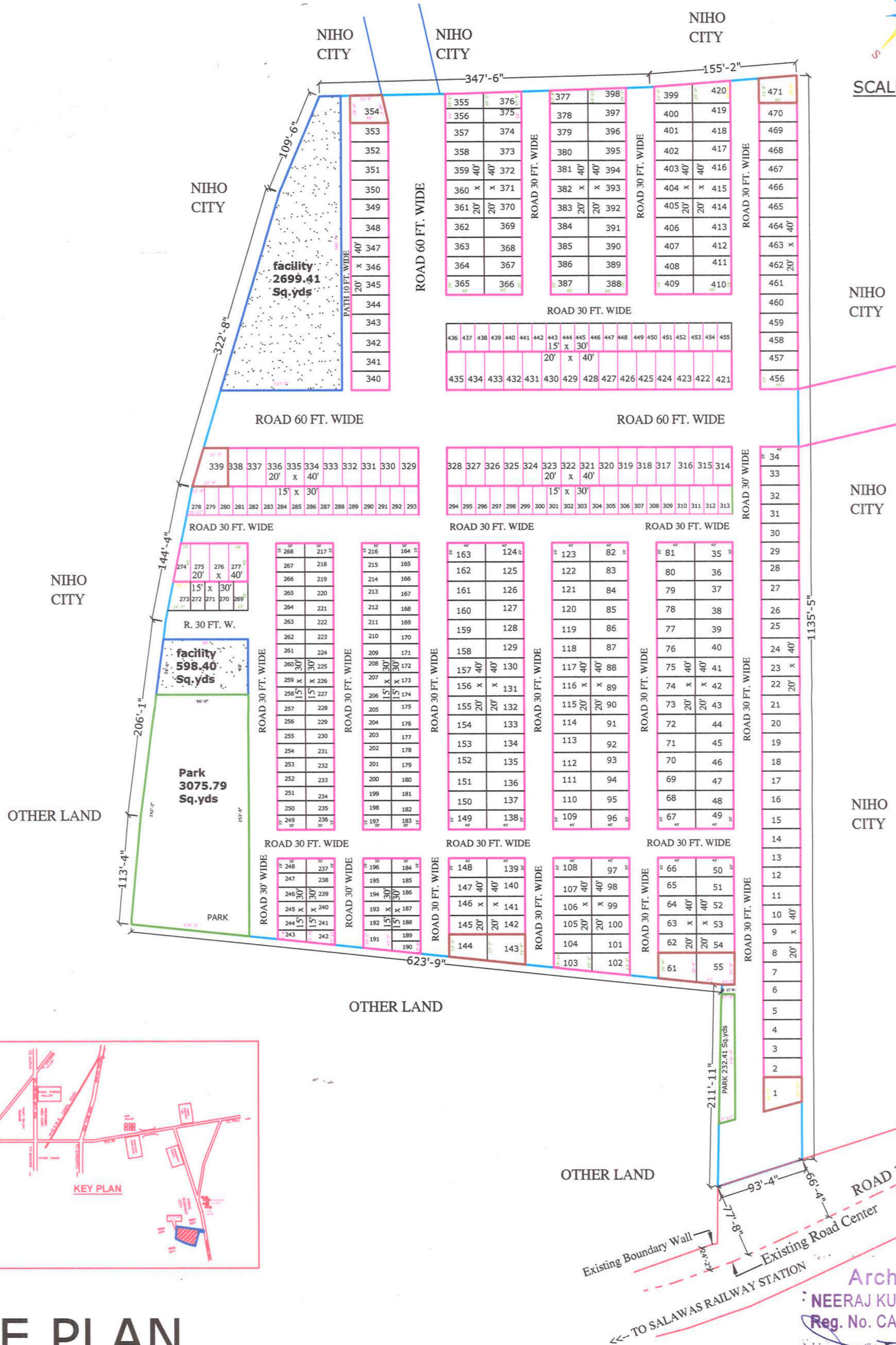


CITY HOME-ENCLAVE (PHASE -3)  
KHASRA NO. 177 OF VILLAGE TANAWRA AT JODHPUR.



SCALE:-1"=100'



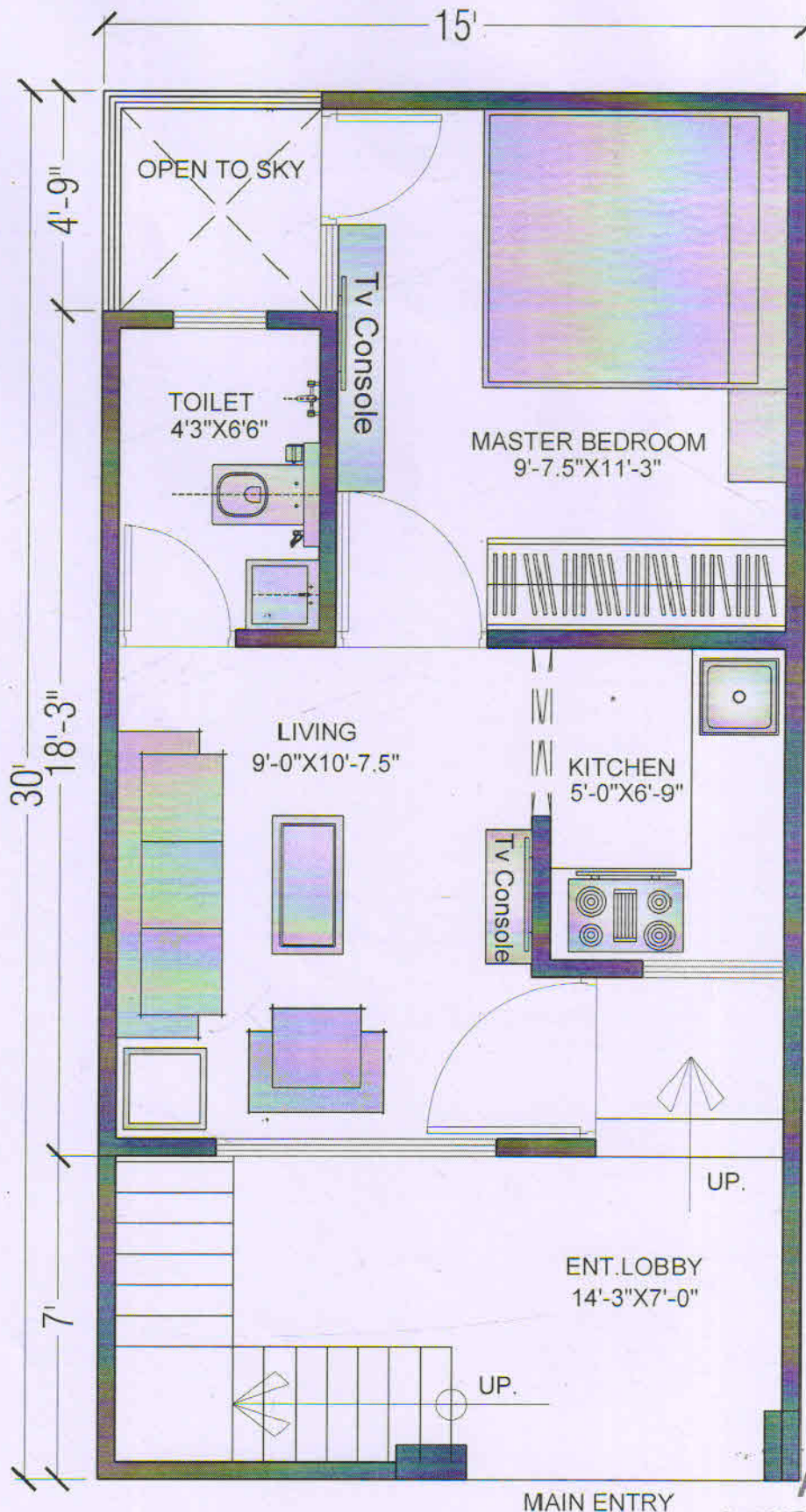
SITE PLAN

|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                               |                          |                            |                                            |                                                                                                                                               |
|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------|----------------------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| <b>PROJECT TITLE :</b><br>PROPOSED CM JAN AWAS YOUNA RESIDENCE<br>BUILDING AT JODHPUR (RAJ.) | <b>GENERAL NOTES :</b><br>1. ALL DIMENSIONS ARE IN THE FEET OTHERWISE MENTIONED.<br>2. DO NOT SCALE THE DRAWING, ONLY WRITTEN DIMENSIONS ARE TO BE FOLLOWED.<br>3. R.C.C. MEMBERS ARE INDICATIVE. REFER ONLY STRUCTURE DRAWING FOR DETAIL.<br>4. ANY DISCREPANCY IN THE DRAWING IS TO BE BROUGHT TO THE NOTICE OF THE ARCHITECT.<br>THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR<br>WRITTEN PERMISSION NOR MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO<br>PART THEREOF SHALL BE DUPLICATED FOR THE PURPOSE OTHER THAN THE EXPRESSED PURPOSE. THE INFORMATION NOR<br>MADE KNOWN TO<br>A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE DUPLICATED FOR<br>THE PURPOSE OTHER<br>THAN THE EXPRESSED PURPOSE. | <b>DRG. NO. :</b><br>EAF/-/01 | <b>SCALE :</b><br>NTS    | <b>DRAWING TITLE :</b>     | <b>PROJECT ARCHITECT</b><br>Ar. N.K. SINGH | <b>ARCHITECTURAL FIRM:-</b><br><b>BUILDFORM</b><br>Design Center<br>Block C - 348, GAUTAM MARG,<br>VAISHALI NAGAR, JAIPUR<br>PH. 0141-4016649 |
| <b>SITE AT :</b>                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>NORTH :</b><br>            | <b>DATE</b>              | <b>DRAWING SUB TITLE :</b> | <b>SIGN.</b>                               |                                                                                                                                               |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                               | <b>REVISION</b><br>-0-0- | <b>DRAWN BY :</b>          |                                            |                                                                                                                                               |

# CITY HOME-ENCLAVE (PHASE -3)

1 BHK UNIT

Khasra NO. 177 OF Village Tanawra At Jodhpur.



MAIN ENTRY

Architect

NEERAJ KUMAR SINGH  
Reg. No. CA/2003/32113

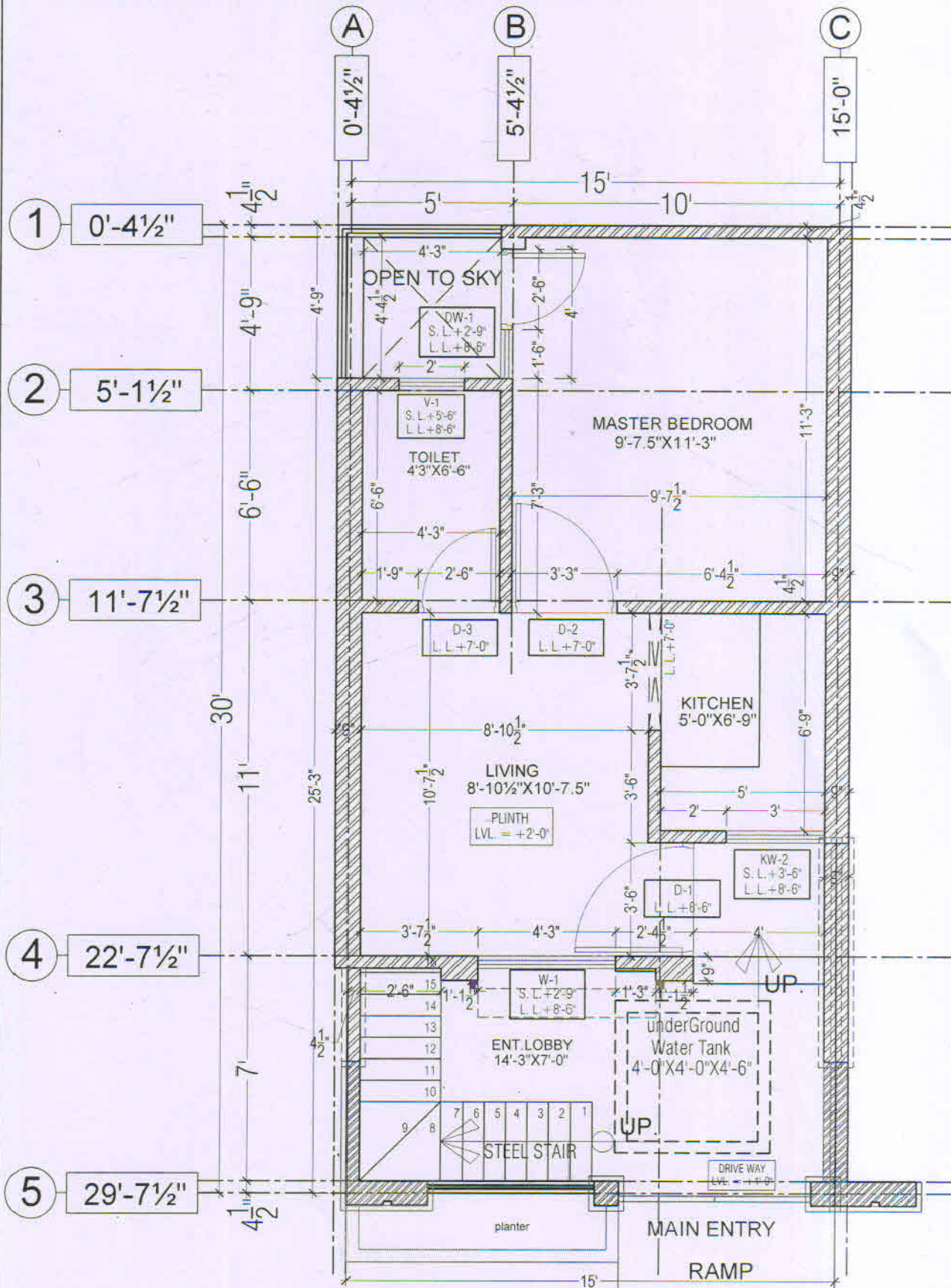
## GROUND FLOOR PLAN

|       |           |         |  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |                   |                                                                                                                                                                                                                                              |
|-------|-----------|---------|--|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SIGN. | REVISIONS |         |  | SCALE           | TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                              | CLIENT    |                   | <div><div>ARCHITECTURAL FIRM:-</div><div></div><div>33-A, VASISTH NAGAR, NEERAGAR COLONY, VAISHALI NAGAR, JAIPUR</div><div>Ph: 0141-4015640</div></div> |
|       | R1        |         |  | N.T.S           |                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |                   |                                                                                                                                                                                                                                              |
|       | R2        |         |  | DATE            |                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |                   |                                                                                                                                                                                                                                              |
|       | R3        |         |  | NAME OF DRAWING |                                                                                                                                                                                                                                                                                                                                                                                                                                                    | DWG NO    | PROJECT ARCHITECT |                                                                                                                                                                                                                                              |
|       | R4        |         |  | CHD             |                                                                                                                                                                                                                                                                                                                                                                                                                                                    | SB/BHA- 1 | N.K. SINGH        |                                                                                                                                                                                                                                              |
| S.N.  | DATE      | DETAILS |  | APPD            | <div><div>THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION. FOR MORE DRAWING, CONTACT THE ARCHITECT. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE DUPLICATED FOR THE PURPOSE OF OTHER THAN THE EXPRESSED PURPOSE. WITHOUT PERMISSION, NO PART THEREOF SHALL BE DUPLICATED FOR THE PURPOSE OF OTHER THAN THE EXPRESSED PURPOSE.</div></div> |           |                   |                                                                                                                                                                                                                                              |

# CITY HOME-ENCLAVE (PHASE -3)

Khasra NO. 177 OF Village Tanawra At Jodhpur.

1 BHK UNIT



Architect  
NEERAJ KUMAR SINGH  
Reg. No. CA/2003/32113

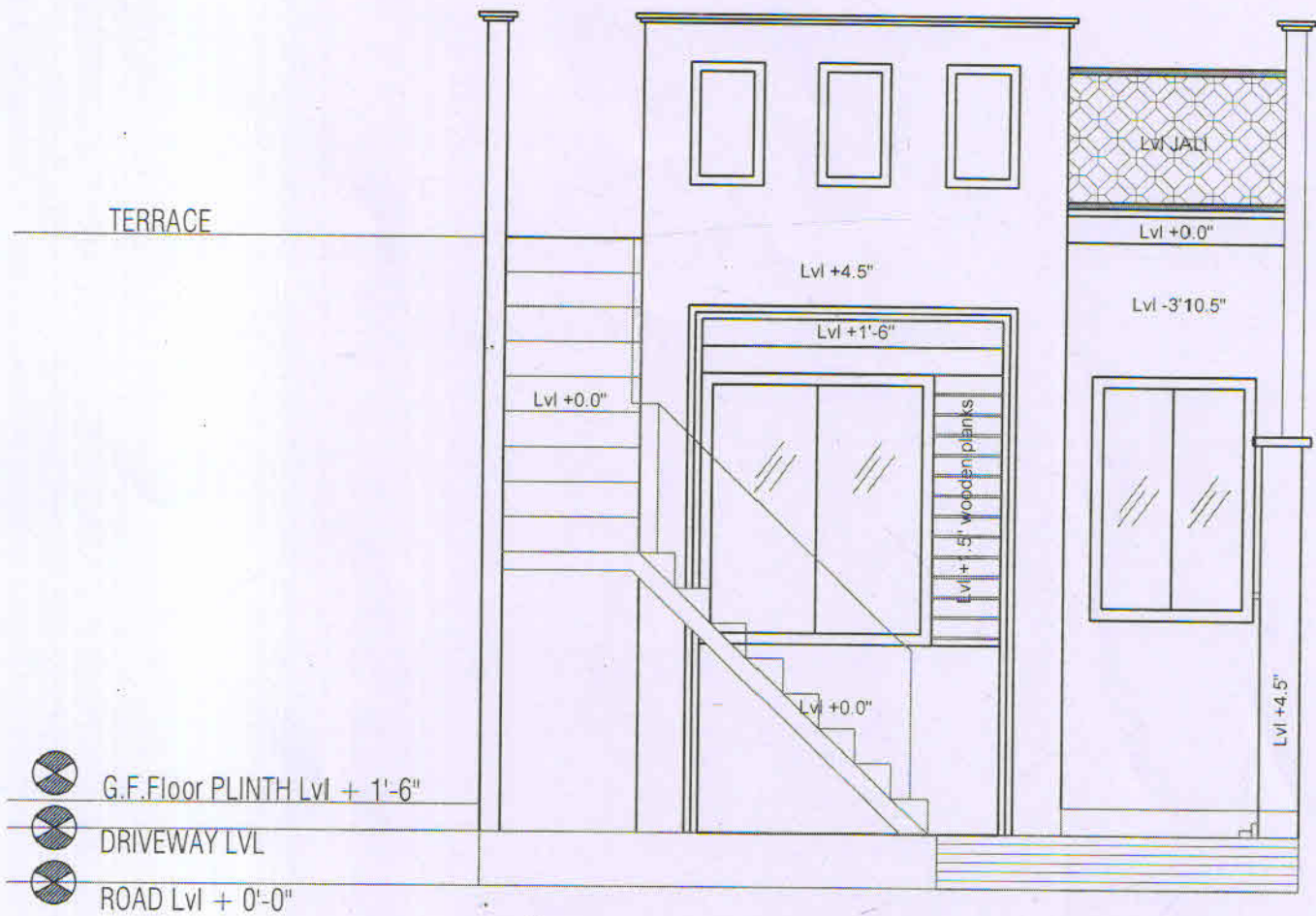
## GROUND FLOOR WORKING PLAN

|                                                                                                                                                                                                                                                                                                                                                                                                              |           |         |                 |                             |            |                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|-----------------|-----------------------------|------------|-------------------|
| SIGN.                                                                                                                                                                                                                                                                                                                                                                                                        | REVISIONS |         | SCALE           | TITLE                       | GUEST      |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                              | R4        |         | N.T.S           | PROPOSED RESIDENCE BUILDING |            |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                              | R3        |         | DATE            |                             |            |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                              | R2        |         | NAME OF DRAWING |                             |            |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                              | R1        |         |                 |                             |            |                   |
|                                                                                                                                                                                                                                                                                                                                                                                                              | R0        |         | CHG             |                             | SR/NO      | PROJECT ARCHITECT |
|                                                                                                                                                                                                                                                                                                                                                                                                              |           |         |                 | SB/BHA- 1                   | N.K. SINGH |                   |
| THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION. NO PART THEREOF SHALL BE REPRODUCED FOR THE PURPOSE OF OTHER THAN THE EXPRESS PURPOSE. WRITTEN PERMISSION NOT MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE REPRODUCED FOR THE PURPOSE OTHER THAN THE EXPRESS PURPOSE. |           |         |                 |                             |            |                   |
| S.N.                                                                                                                                                                                                                                                                                                                                                                                                         | DATE      | DETAILS | APPRO           |                             |            |                   |
| ARCHITECTURAL FIRM                                                                                                                                                                                                                                                                                                                                                                                           |           |         |                 |                             |            |                   |
|                                                                                                                                                                                                                                                                                                                         |           |         |                 |                             |            |                   |
| 33-A, VASISTH MARG, NEVSAGAR COLONY, VAISHALI NAGAR, JAIPUR                                                                                                                                                                                                                                                                                                                                                  |           |         |                 |                             |            |                   |
| PH 0141-4019048                                                                                                                                                                                                                                                                                                                                                                                              |           |         |                 |                             |            |                   |

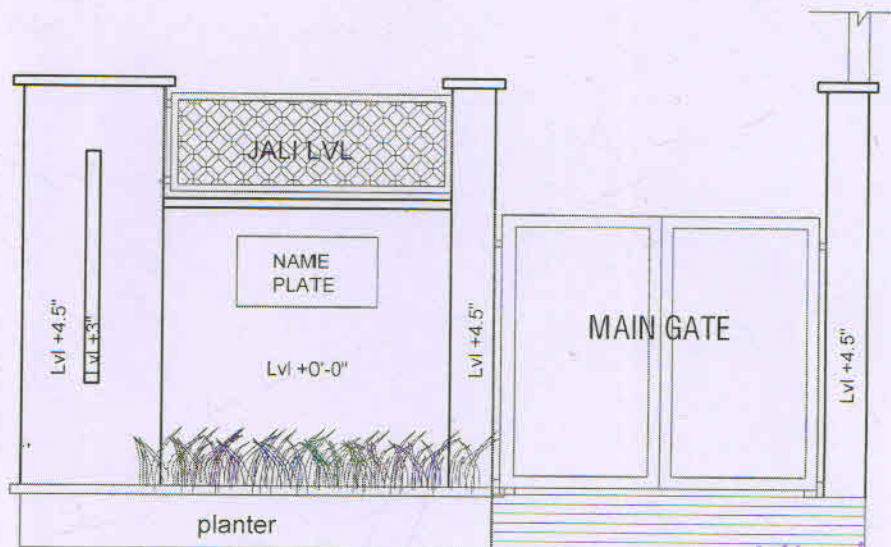
# CITY HOME-ENCLAVE (PHASE -3)

Khasra NO. 177 OF Village Tanawra At Jodhpur.

1 BHK UNIT



FRONT ELEVATION



BOUNDARY WALL ELEVATION

Architect

NEERAJ KUMAR SINGH  
Reg. No. CA/2003/32113

|           |           |         |  |       |                                          |                 |                        |                                                                                                                                                                                                                                                                |                                 |
|-----------|-----------|---------|--|-------|------------------------------------------|-----------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| SIGN.     | REVISIONS |         |  | SCALE | TITLE<br><br>PROPOSED RESIDENCE BUILDING | CLIENT          |                        | <div>ARCHITECTURAL FIRM -</div> <div> BUILDFORM Design Center</div> <div>33-A VASISTH MARG, NEEMISAGAR COLONY, VAISHALI, NAGAR, JALPURI</div> <div>PH: 0141-4016640</div> |                                 |
|           | R4        |         |  | DATE  |                                          | NAME OF DRAWING | SRI. NO.<br>SB/BH/A- 1 |                                                                                                                                                                                                                                                                | PROJECT ARCHITECT<br>N.K. SINGH |
|           | R3        |         |  |       |                                          |                 |                        |                                                                                                                                                                                                                                                                |                                 |
|           | R2        |         |  |       |                                          |                 |                        |                                                                                                                                                                                                                                                                |                                 |
|           | R1        |         |  |       |                                          |                 |                        |                                                                                                                                                                                                                                                                |                                 |
|           | R0        |         |  |       |                                          |                 |                        |                                                                                                                                                                                                                                                                |                                 |
| S.N. DATE |           | DETAILS |  | CHG.  | APPD.                                    |                 |                        |                                                                                                                                                                                                                                                                |                                 |

**CITY HOME-ENCLAVE (PHASE -3)**  
**Khasra NO. 177 OF Village Tanawra At Jodhpur.**



**FRONT ELEVATION 1 BHK**

| GENERAL NOTES                                                                                                                                                          | ASSOCIATES/CONSULTANTS | REVISION | DATE | PRINTS | ISSUED TO | REMARKS | DRG. TITLE |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------|------|--------|-----------|---------|------------|
| 1. ALL DIMENSIONS ON THIS DRAWING ARE IN FEET AND INCHES.                                                                                                              | STRUCTURAL             |          |      |        |           |         | SUB-TITLE  |
| 2. ONLY WRITTEN DIMENSIONS ARE TO BE FOLLOWED. DRAWING SHOULD NOT BE SCALED UNDER ANY CIRCUMSTANCES.                                                                   | ELECTRICAL             |          |      |        |           |         | SCALE      |
| 3. ALL MEASUREMENTS MUST BE CHECKED AND VERIFIED BY THE CONTRACTOR PRIOR TO EXECUTION OF WORK AT THE SITE.                                                             | PLUMBING               |          |      |        |           |         | DRG. NO.   |
| 4. THE DRAWING IS TO BE REVISIONED BY THE ARCHITECT WITHIN RELEVANT STRUCTURAL SERVICES & FACILITY PLANNING DRAWINGS.                                                  | HVAC                   |          |      |        |           |         | DATE       |
| 5. ARCHITECTURAL DRAWINGS ARE TO BE FOLLOWED FOR THE LOCATION OF ALL STRUCTURAL MEMBERS & MASONRY WALLS.                                                               | CLIENT                 |          |      |        |           |         | DESIGN BY  |
| 6. FOR INDEX & REINFORCEMENT DETAILS OF STRUCTURAL MEMBERS, RELEVANT STRUCTURAL DRAWINGS ARE TO BE REFERRED.                                                           | PROJECT TITLE          |          |      |        |           |         | CHECKED BY |
| 7. ANY DISCREPANCIES BETWEEN ARCHITECTURAL, STRUCTURAL, AND SERVICES DRAWINGS MUST BE BROUGHT TO THE NOTICE OF THE ARCHITECT IMMEDIATELY & PRIOR TO EXECUTION AT SITE. | SITE/AT                |          |      |        |           |         | APPROVED   |
| 8. CO-ORDINATION WITH SERVICES SUCH AS HVAC, PLUMBING & ELECTRICAL, ETC. IS THE RESPONSIBILITY OF THE CONTRACTOR.                                                      |                        |          |      |        |           |         |            |
| 9. ALL MASONRY WALLS SHOULD BE ALIGNED WITH THE COLUMNS AS INDICATED ON THE PLAN UNLESS SPECIFIED OR THE POSITION ALSO CALCULATED USING THE DIMENSIONS.                |                        |          |      |        |           |         |            |
| 10. FOR DETAILS, REFER RELEVANT LARGE SCALE DETAIL CROSS AS INDICATED.                                                                                                 |                        |          |      |        |           |         |            |

THIS DRAWING IS THE PROPERTY OF **BUILDFORM STUDIO**. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION NOR MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART OF THIS DRAWING SHALL BE REPRODUCED FOR ANY PURPOSE OTHER THAN THE EXPRESSED PURPOSE.

**PROJECT ARCHITECT**

Ar. N.K. SINGH

**Architect**

**NEERAJ KUMAR SINGH**

**Reg. No. CA/2003/32113**

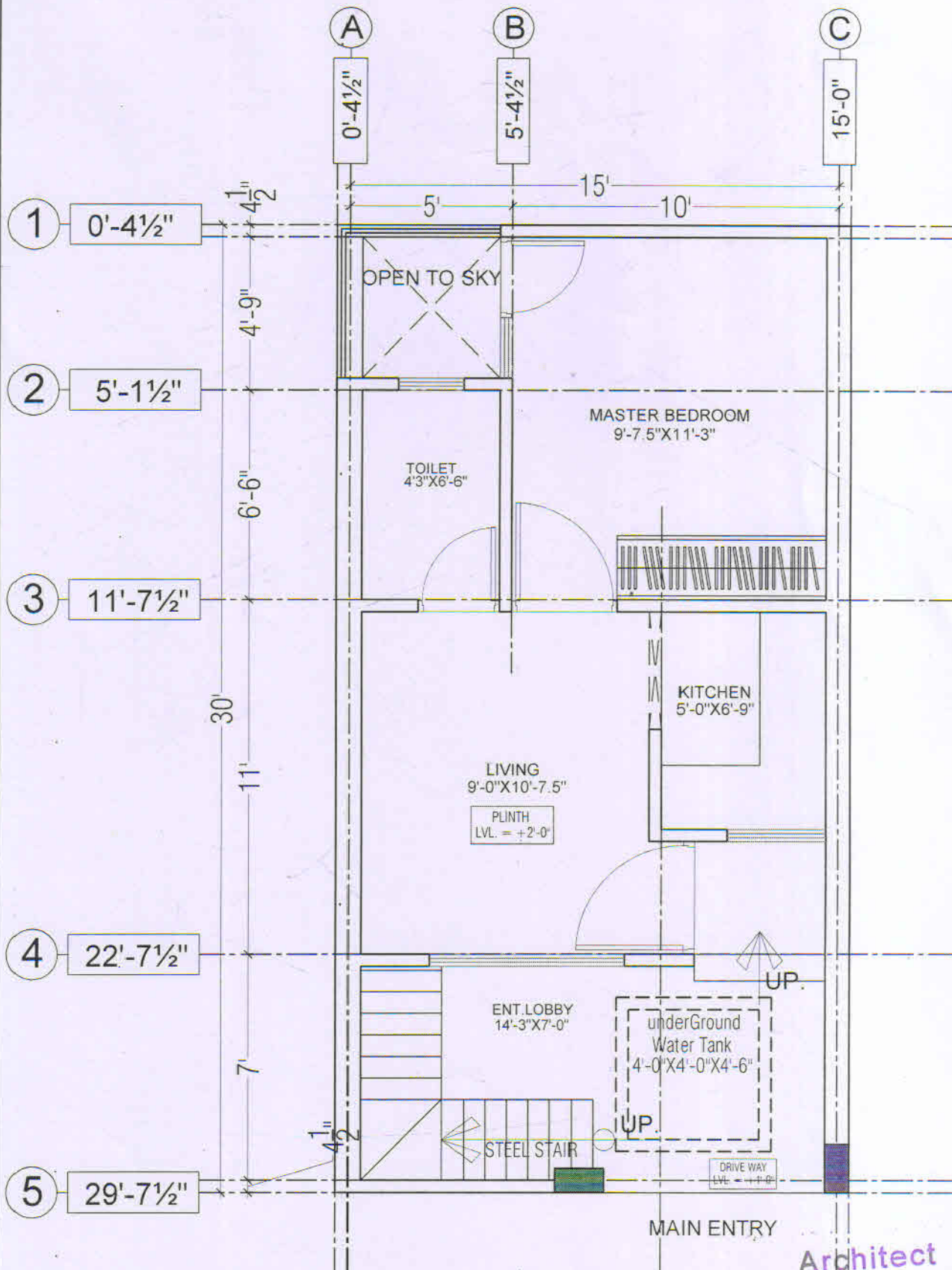
SIGN

ARCHITECTURAL FIRM:

**BUILDFORM STUDIO**

C-348, GAUTAM MARG, BLOCK C, NEAR AMARPALI CIRCLE, VAISHALI NAGAR, JODHPUR-21

PH. 0141-4016649



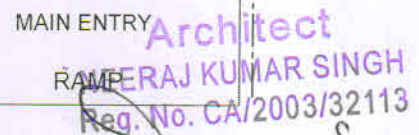
**Architect**  
**NEERAJ KUMAR SINGH**  
 Reg. No. CA/2003/32113

**GROUND FLOOR CENTER LINE PLAN**

| SIGN.                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | REVISIONS | SCALE   | N.T.S. | TITLE                       | CLIENT            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|--------|-----------------------------|-------------------|
| R4                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |         |        | PROPOSED RESIDENCE BUILDING |                   |
| R3                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |         |        |                             |                   |
| R2                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |         |        |                             |                   |
| R1                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |         |        |                             |                   |
| R0                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |         |        |                             |                   |
| S.N.                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | DATE      | DETAILS | APPD.  | DRG. NO.                    | PROJECT ARCHITECT |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |         |        | SB/BH/A-1                   | N.K. SINGH        |
| <small>THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION. NO PART OF THIS DRAWING SHALL BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT THE WRITTEN PERMISSION OF BUILDFORM DESIGN CENTER. ANY VIOLATION OF THIS NOTICE SHALL BE SUBJECT TO LEGAL ACTION.</small> |           |         |        |                             |                   |
| <small>ARCHITECTURAL FIRM: BUILDFORM Design Center<br/>                 33-A, VASHISTHA MARG, NEEMISAGAR COLONY, VAISHALI, JODHPUR<br/>                 PH: 9741-80730/2</small>                                                                                                                                                                                                                                                                                            |           |         |        |                             |                   |

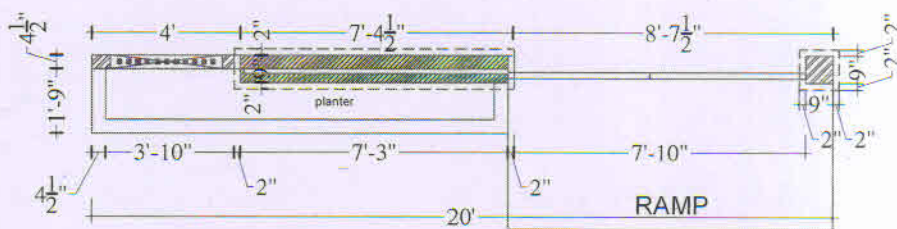
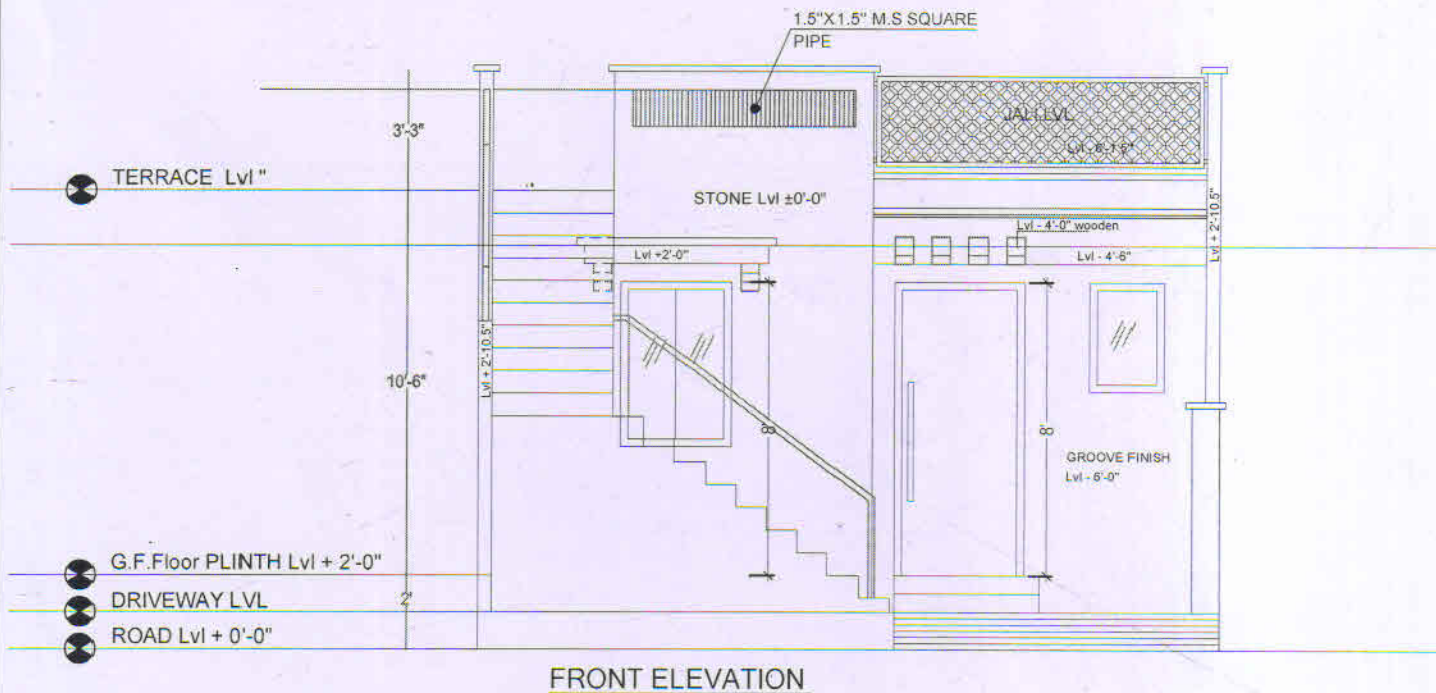
## 2 BHK UNIT

2 BHK UNIT

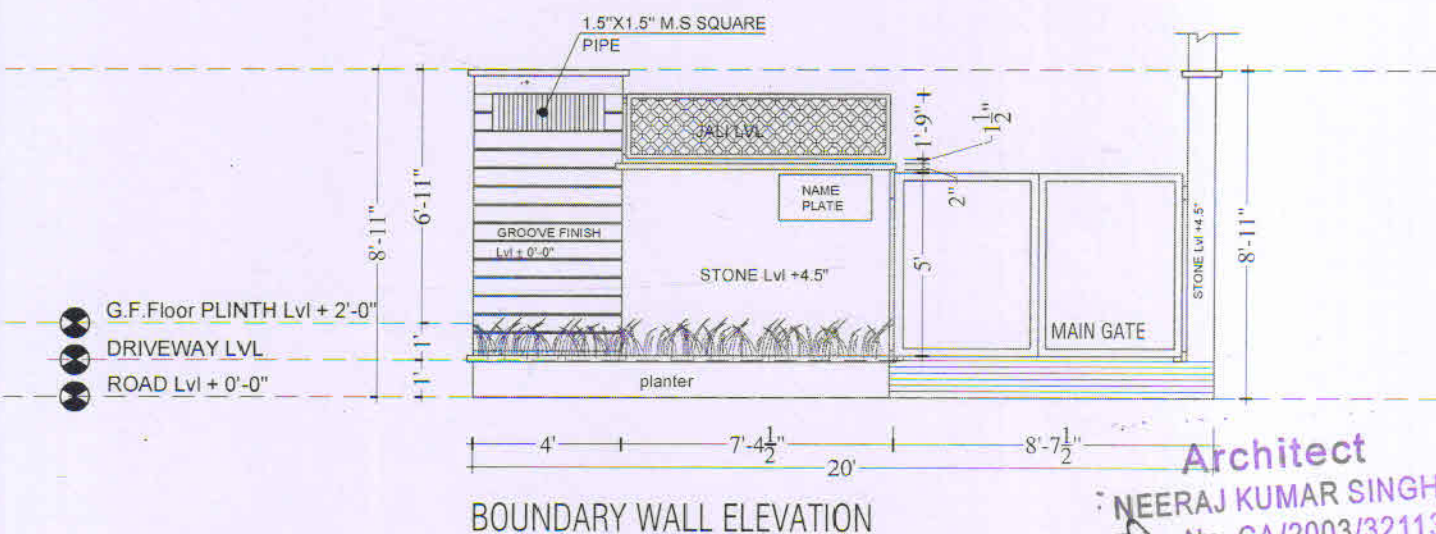


## GROUND FLOOR WORKING PLAN

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |           |  |       |                                                         |          |                     |                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------|--|-------|---------------------------------------------------------|----------|---------------------|---------------------------------------------------------------------------------------------|
| SIGN.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | REVISIONS |  | SCALE | TITLE                                                   | CLIENT   | ARCHITECTURAL FIRM: |                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | R4        |  |       |                                                         |          |                     |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | R3        |  |       |                                                         |          |                     |                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | R2        |  |       |                                                         |          |                     |                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | R1        |  |       |                                                         |          |                     |                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | R0        |  |       |                                                         |          |                     |                                                                                             |
| S.N. DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | DETAILS   |  | CHG.  | NAME OF DRAWING                                         | DWG. NO. | PROJECT ARCHITECT   |                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |           |  | APPD. | PROPOSED RESIDENCE BUILDING<br>SB/BH/A- 1<br>N.K. SINGH |          |                     | 33-A, VASUDEV-3 MARKET, NEHRU SARAI<br>COLONY, VAISHALI, NAQAR, JALPURI<br>Ph: 0141-4056546 |
| THE DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR USED WITHOUT THE WRITTEN PERMISSION OF BUILDFORM DESIGN CENTER. THE INFORMATION IS BASED ON THE DATA FURNISHED BY THE CLIENT. BUILDFORM DESIGN CENTER SHALL NOT BE RESPONSIBLE FOR ANY INACCURACIES OR OMISSIONS IN THE DRAWING. THE CLIENT SHALL BE RESPONSIBLE FOR THE ACCURACY OF THE DATA FURNISHED. THE INFORMATION IS BASED ON THE DATA FURNISHED BY THE CLIENT. BUILDFORM DESIGN CENTER SHALL NOT BE RESPONSIBLE FOR ANY INACCURACIES OR OMISSIONS IN THE DRAWING. THE CLIENT SHALL BE RESPONSIBLE FOR THE ACCURACY OF THE DATA FURNISHED. |  |           |  |       |                                                         |          |                     |                                                                                             |



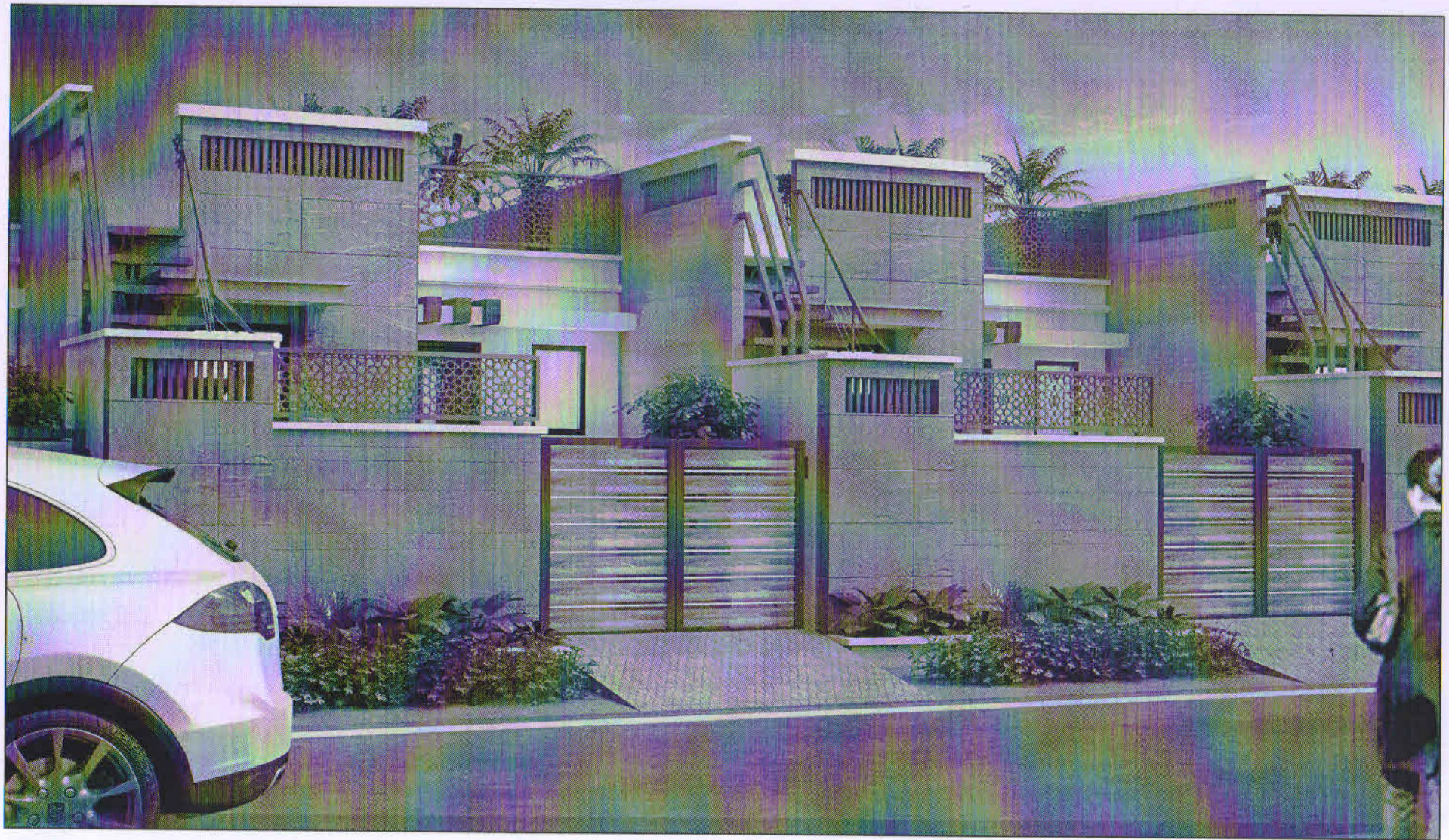
**BOUNDARY WALL PLAN**



**Architect**  
**NEERAJ KUMAR SINGH**  
 Reg. No. CA/2003/32113

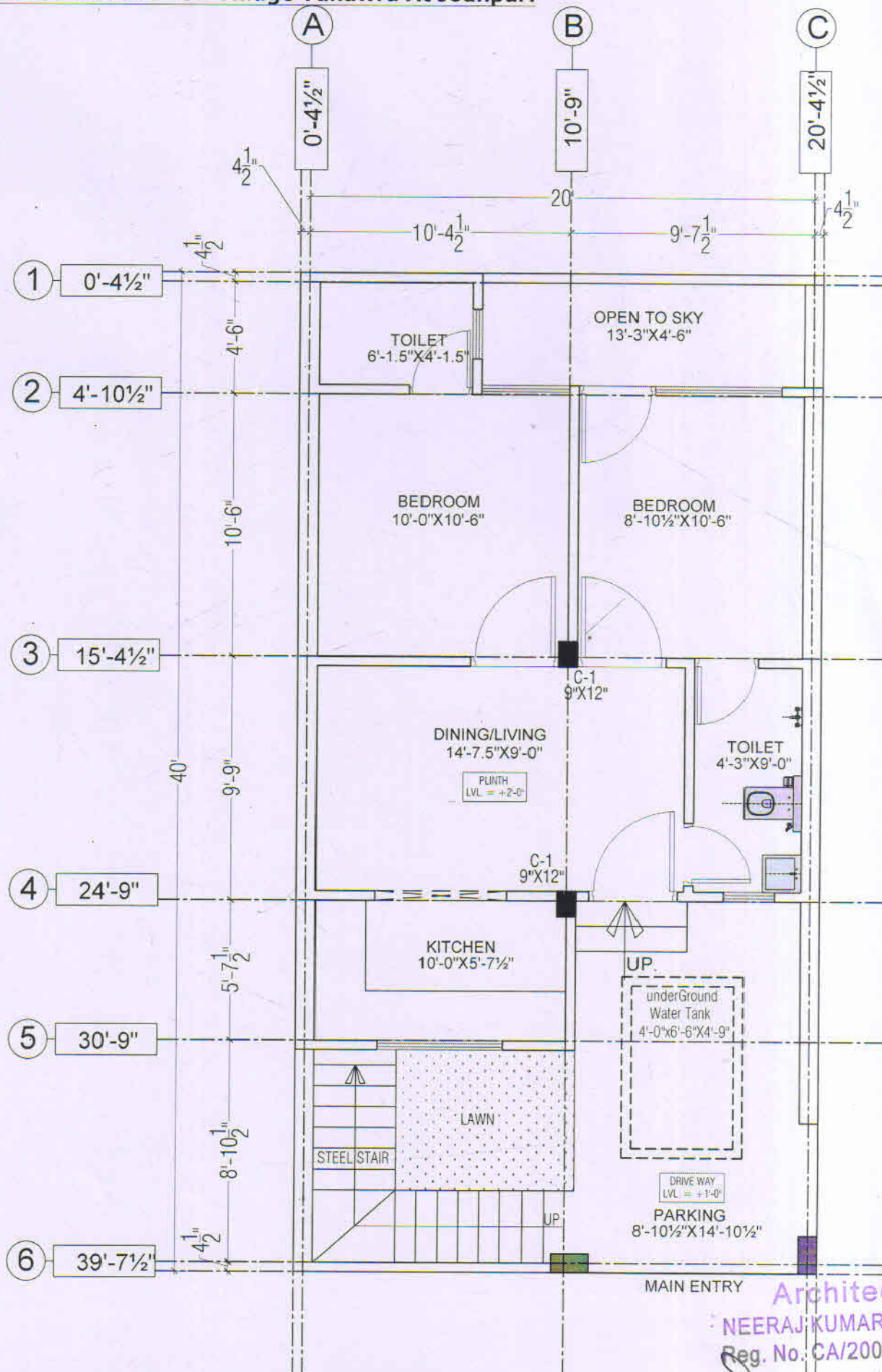
| SIGN.      | REVISIONS | SCALE | TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | CLIENT            |
|------------|-----------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| R4         |           | DATE  | PROPOSED RESIDENCE BUILDING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                   |
| R3         |           | CHD   | NAME OF DRAWING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DRS NO.           |
| R2         |           | APPD  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | SB/BH/A-1         |
| R1         |           |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | PROJECT ARCHITECT |
| R0         |           |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | N.K. SINGH        |
| S.N. DATE. | DETAILS   |       | <small>THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION NOR MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE DUPLICATED FOR THE PURPOSE OTHER THAN THE EXPOSED PURPOSE. WRITTEN PERMISSION NOT MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE DUPLICATED FOR THE PURPOSE OTHER THAN THE EXPOSED PURPOSE.</small> |                   |
|            |           |       | <b>ARCHITECTURAL FIRM:</b><br><b>BUILDFORM</b><br>Design Center<br>33-A, VASHISTH MARG, NEVISAGAR COLONY, VAISHALI NAGAR, JAIPUR.<br>PH. 0141-4016649                                                                                                                                                                                                                                                                                                                                                       |                   |

**CITY HOME-ENCLAVE (PHASE -3)**  
**Khasra NO. 177 OF Village Tanawra At Jodhpur.**



**FRONT ELEVATION 2 BHK**

| <b>GENERAL NOTES</b><br>1. ALL DIMENSIONS ON THIS DRAWING ARE IN FEET AND INCHES.<br>2. ONLY WRITTEN DIMENSIONS ARE TO BE FOLLOWED. DRAWING SHOULD NOT BE SCALED UNDER ANY CIRCUMSTANCES.<br>3. ALL MEASUREMENTS MUST BE CHECKED AND CONFIRMED BY THE CONTRACTOR PRIOR TO EXECUTION OF WORK AT THE SITE.<br>4. THIS DRAWING IS TO BE READ IN CONJUNCTION WITH ALL RELEVANT STRUCTURAL, ELECTRICAL, PLUMBING, HVAC, AND MECHANICAL DRAWINGS.<br>5. ARCHITECTURAL DRAWINGS ARE TO BE FOLLOWED FOR THE LOCATION OF ALL STRUCTURAL MEMBERS & MASONRY WALLS.<br>6. FOR SIZES & REINFORCEMENT DETAILS OF STRUCTURAL MEMBERS, RELEVANT STRUCTURAL DRAWINGS ARE TO BE REFERRED.<br>7. ANY DISCREPANCIES BETWEEN ARCHITECTURAL, STRUCTURAL, AND SERVICES DRAWINGS MUST BE BROUGHT TO THE NOTICE OF THE ARCHITECT IMMEDIATELY & PRIOR TO EXECUTION AT SITE.<br>8. CO-ORDINATION WITH SERVICES SUCH AS WATER, PLUMBING & ELECTRICAL, ETC. IS THE RESPONSIBILITY OF THE CONTRACTOR.<br>9. ALL MASONRY WALLS SHOULD BE ALIGNED WITH THE COLUMNS AS INDICATED ON THE PLAN, IRRESPECTIVE OF THE POSTTENSIONING CALCULATED WITH THE DIMENSIONS.<br>10. FOR DETAILS, REFER TO EVERY LARGE SCALE DETAIL DRAWING AS INDICATED. |       | <b>ASSOCIATES CONSULTANTS</b><br><table border="1"> <tr> <th>REVISION</th> <th>DATE</th> <th>PRINTS</th> <th>ISSUED TO</th> <th>REMARKS</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> |           | REVISION                                                                                               | DATE | PRINTS | ISSUED TO | REMARKS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | <b>DRG. TITLE</b><br><table border="1"> <tr> <th>DRG. TITLE</th> <th>SCALE</th> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </table> |  | DRG. TITLE | SCALE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------------------------------------------------|------|--------|-----------|---------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| REVISION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | DATE  | PRINTS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ISSUED TO | REMARKS                                                                                                |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DRG. TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SCALE |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>PROJECT TITLE:</b><br>SITE AT:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |       | <b>DESIGN BY:</b><br><b>CHECKED BY:</b><br><b>APPROVED:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |           | <b>Architect</b><br><b>Reg. No. CA/2003/32113</b><br><b>PROJECT ARCHITECT</b><br><b>Ar. N.K. SINGH</b> |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>ARCHITECTURAL FIRM:</b><br><b>BUILDFORM STUDIO</b><br>C-346, GAUTAM MARG, BLOCK-C, NEAR AMARAPALI CIRCLE, VAISHALI NAGAR, JAIPUR-21<br>PH. 0141-4016649                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       | THIS DRAWING IS THE PROPERTY OF BUILDFORM STUDIO. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION. NO PART OF THIS DRAWING OR THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART OF THE SAME SHALL BE USED FOR THE PURPOSE OTHER THAN THE EXPRESSED PURPOSE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |                                                                                                        |      |        |           |         |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                         |  |            |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |



**Architect**

**NEERAJ KUMAR SINGH**

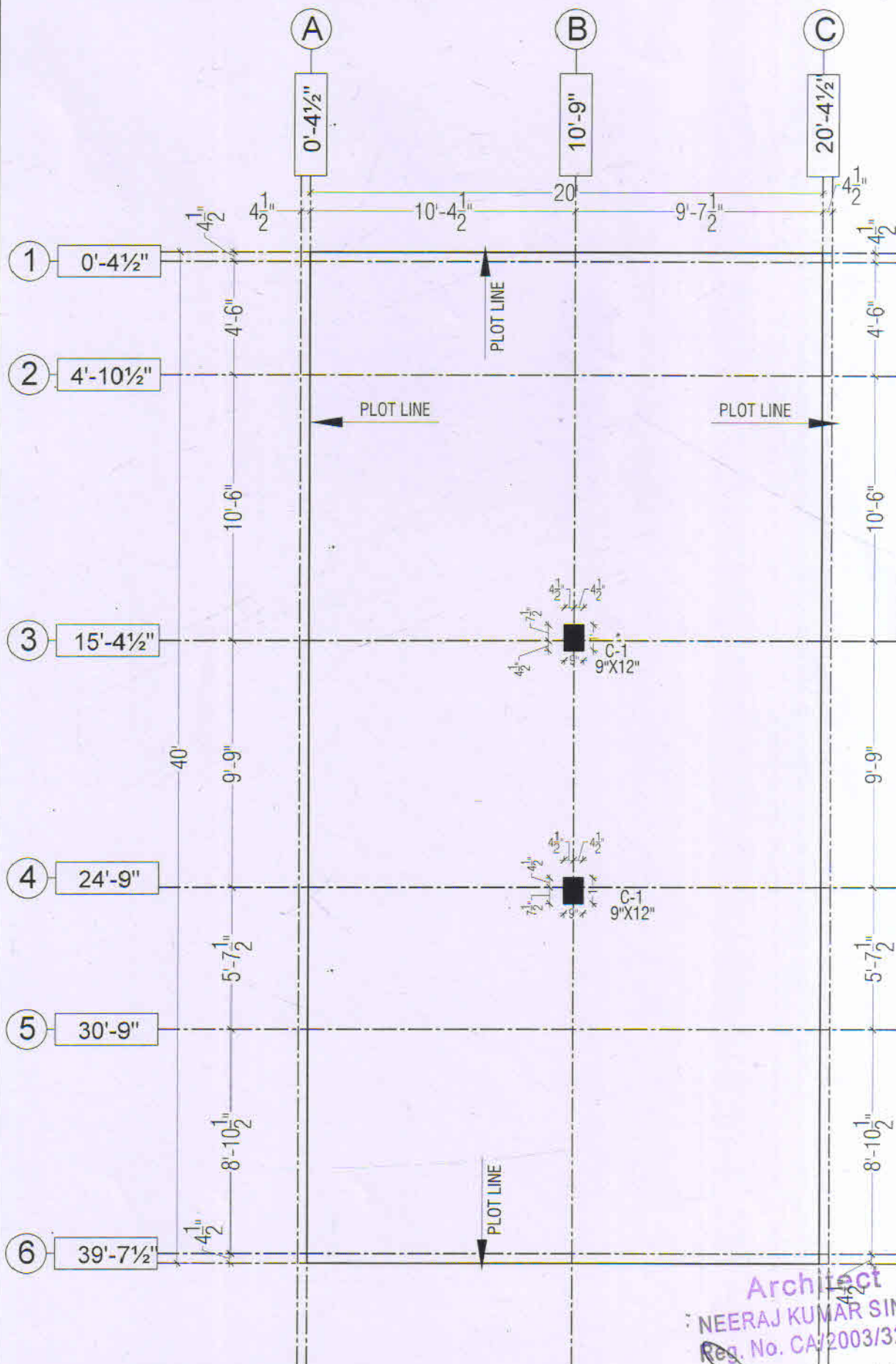
**Reg. No. CA/2003/32113**

**GROUND FLOOR CENTER LINE PLAN**

| SIGN. | REVISIONS | SCALE   | TITLE                       | CLIENT |
|-------|-----------|---------|-----------------------------|--------|
| R4    |           |         | PROPOSED RESIDENCE BUILDING |        |
| R3    |           |         |                             |        |
| R2    |           |         |                             |        |
| R1    |           |         |                             |        |
| R0    |           |         |                             |        |
| S.N.  | DATE      | DETAILS | APPRO.                      |        |

**BUILDFORM**  
**Design Center**

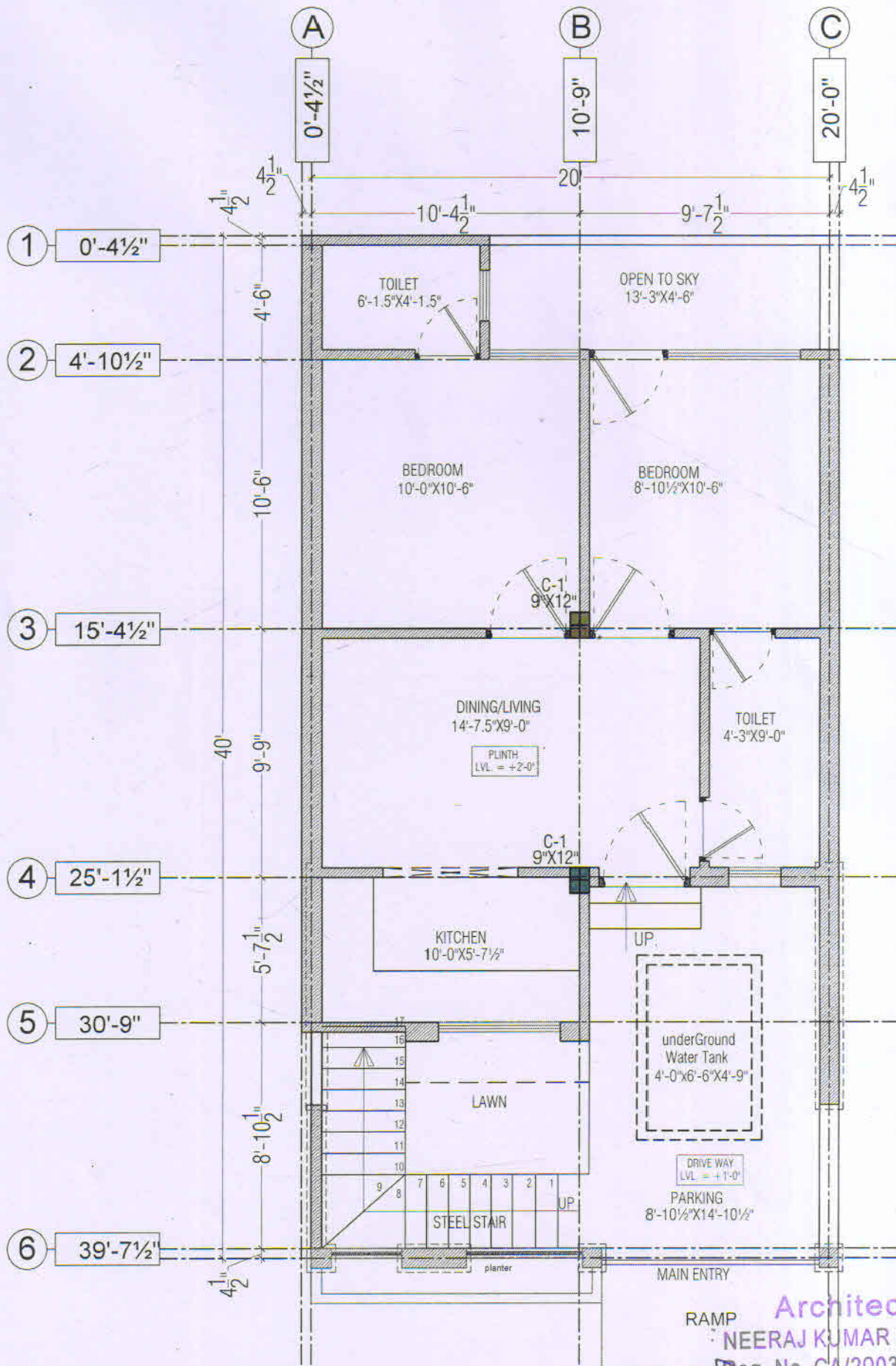
33-A, VASISTH MARG, NEERAGAR  
 COLONY, VASISTH MARG, JODHPUR  
 PIN: 3141 40/3546



**Architect**  
**NEERAJ KUMAR SINGH**  
 Reg. No. CA/2003/32113

**COLUMN CENTER LINE PLAN**

| SIGN. | REVISIONS | SCALE   | TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | CLIENT                       | ARCHITECTURAL FIRM |
|-------|-----------|---------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------|
| R4    |           | DATE    | PROPOSED RESIDENCE BUILDING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                              | BUILDFORM          |
| R3    |           |         | NAME OF CLIENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | DRG NO. SB/BHA-1             | Design Center      |
| R2    |           | DRG     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | PROJECT ARCHITECT N.K. SINGH |                    |
| R1    |           | APPD    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                              |                    |
| R0    |           |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                              |                    |
| S.N.  | DATE      | DETAILS | <small>THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER IT SHALL NOT BE COPIED, REPRODUCED OR USED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF BUILDFORM DESIGN CENTER. IF ANY PART OF THIS DRAWING IS USED FOR ANY OTHER PURPOSE WITHOUT THE WRITTEN PERMISSION OF BUILDFORM DESIGN CENTER, THE USER SHALL BE RESPONSIBLE FOR ANY AND ALL DAMAGES, LOSSES AND EXPENSES INCURRED BY A THIRD PARTY. THE INFORMATION IS GIVEN ON THIS UNDERSTANDING THAT NO PART THEREOF SHALL BE RELIED UPON FOR THE PURPOSES OTHER THAN THE EXPRESS PURPOSE.</small> |                              |                    |
|       |           |         | <small>33-A, VASHPOTH MAPOL, NEEMSAGAR COLONY, VAISHALI NAGAR, JAPUR</small><br><small>PH: 0141-2770629</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                              |                    |

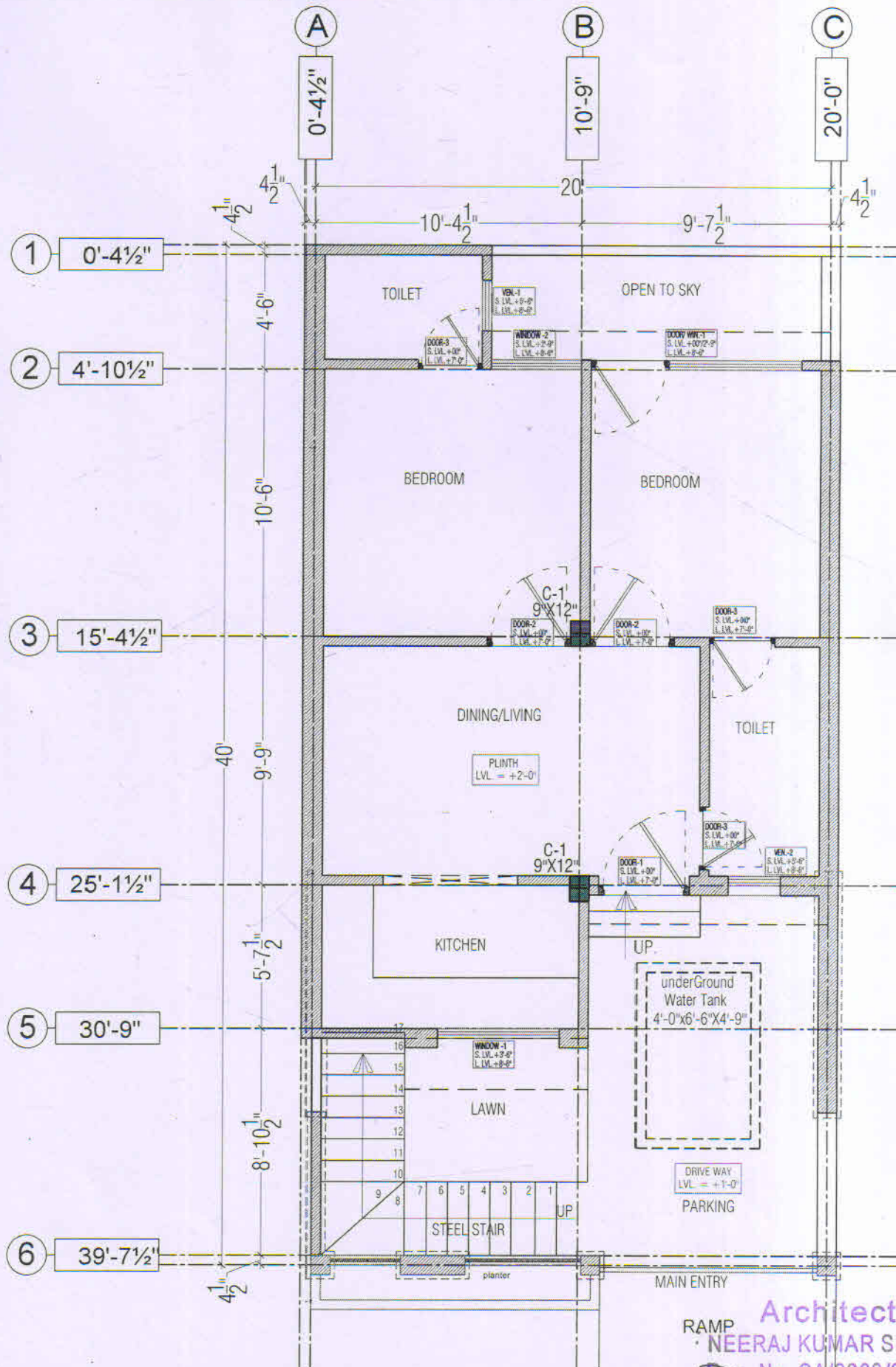


**GROUND FLOOR PLAN**

|       |           |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
|-------|-----------|------|--|---------|--|-----------------------------|--|--------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SIGN. | REVISIONS |      |  | SCALE   |  | TITLE                       |  | CLIENT |  | <div><b>BUILDFORM</b><br/>Design Center</div> <div>33-A, VASHISTH MARG, NEEMISAGAR COLONY, VAISHALI NAGAR, JAIPUR</div> <div>PH: 0141-4015048</div> |
|       | R4        |      |  |         |  | PROPOSED RESIDENCE BUILDING |  |        |  |                                                                                                                                                                                                                                          |
|       | R3        |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
|       | R2        |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
|       | R1        |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
|       | R0        |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
| S.N.  |           | DATE |  | DETAILS |  | CHD.                        |  | APPD.  |  |                                                                                                                                                                                                                                          |
|       |           |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
|       |           |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
|       |           |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |
|       |           |      |  |         |  |                             |  |        |  |                                                                                                                                                                                                                                          |

THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR UNAUTHORIZED REPRODUCTION OR MODIFICATION TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO THIRD PARTY SHALL BE DISGUISED FROM THE PURPOSES COVERED BY THE TYPES OF INFORMATION NOT BEING KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO THIRD PARTY SHALL BE DISGUISED FOR THE PURPOSES OTHER THAN THE AUTHORIZED PURPOSE.

**Architect**  
**NEERAJ KUMAR SINGH**  
 Reg. No. CA/2003/32113



**GROUND FLOOR WORKING PLAN**

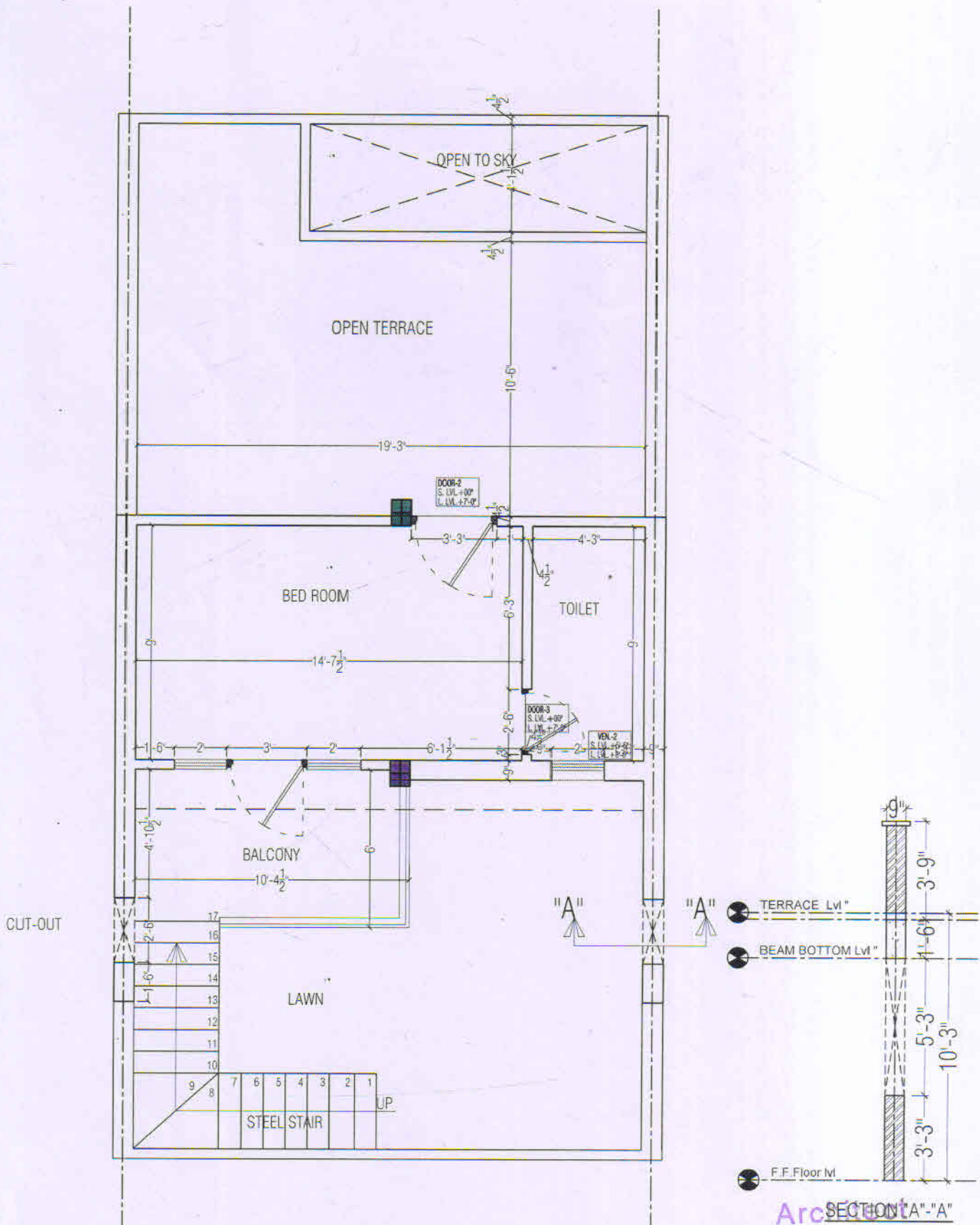
**Architect**  
**NEERAJ KUMAR SINGH**  
 Reg. No. CA/2003/32113

| SIGN. | REVISIONS |         | SCALE |  | TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | CLIENT |  | ARCHITECTURAL FIRM                                                |
|-------|-----------|---------|-------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------|--|-------------------------------------------------------------------|
|       | R4        |         | DATE  |  | PROPOSED RESIDENCE BUILDING                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |        |  |                                                                   |
|       | R3        |         |       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |        |  | BUILDFORM<br>Design Center                                        |
|       | R2        |         |       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |        |  |                                                                   |
|       | R1        |         |       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |        |  | S3-A, VARSHISTH MARG, NEEMSAGAR,<br>COLONY, VAISHALI NAGAR, JAPUR |
|       | R0        |         |       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |        |  |                                                                   |
|       |           |         |       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |        |  | PH: 9741-4079542                                                  |
| S.N.  | DATE      | DETAILS | APPD. |  | THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR REPRODUCED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF BUILDFORM DESIGN CENTER. IF IT IS COPIED OR REPRODUCED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF BUILDFORM DESIGN CENTER, THE USER SHALL BE LIABLE FOR ALL DAMAGES AND LOSSES. BUILDFORM DESIGN CENTER SHALL NOT BE RESPONSIBLE FOR ANY DAMAGES AND LOSSES. BUILDFORM DESIGN CENTER SHALL NOT BE RESPONSIBLE FOR ANY DAMAGES AND LOSSES. |  |        |  |                                                                   |

# CITY HOME-ENCLAVE (PHASE -3)

Khasra NO. 177 OF Village Tanawra At Jodhpur.

3 BHK UNIT

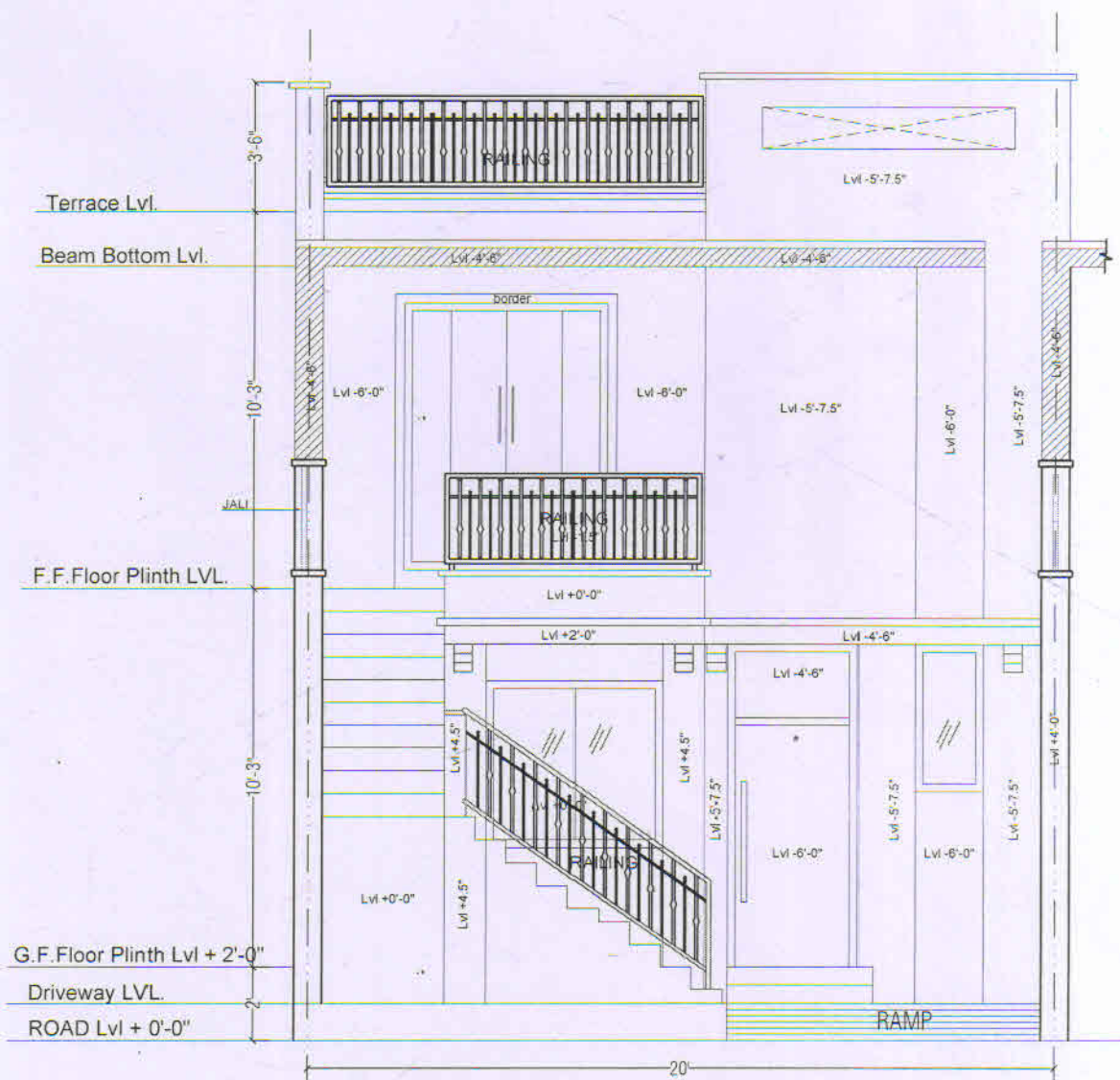


FIRST FLOOR WORKING PLAN

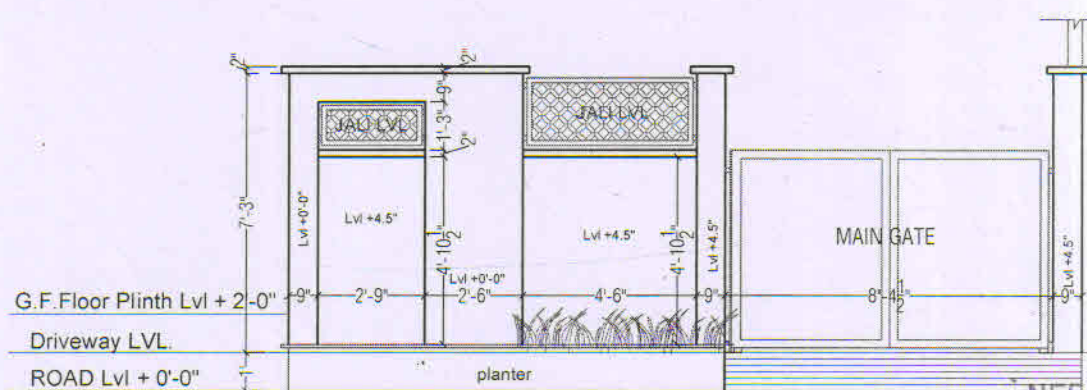
| SIGN. | REVISIONS | SCALE   | TITLE                                                                                                                                                                                                                                                                                               | CLIENT            |
|-------|-----------|---------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| R4    |           | DATE    | PROPOSED RESIDENCE BUILDING                                                                                                                                                                                                                                                                         |                   |
| R3    |           |         |                                                                                                                                                                                                                                                                                                     |                   |
| R2    |           |         |                                                                                                                                                                                                                                                                                                     |                   |
| R1    |           | CHD.    | NAME OF DRAWING                                                                                                                                                                                                                                                                                     | DRG. NO.          |
| RD    |           | APPD.   | SB/BH/A-1                                                                                                                                                                                                                                                                                           | PROJECT ARCHITECT |
|       |           |         |                                                                                                                                                                                                                                                                                                     | N.K. SINGH        |
| S.N.  | DATE      | DETAILS | THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION NOR MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE DUPLICATED FOR THE PURPOSE OTHER THAN THE EXPRESSED PURPOSE. |                   |
|       |           |         | ARCHITECTURAL FIRM:<br><b>BUILDFORM</b><br>Design Center<br>33-A, VASHISTH MARG, NEEMBAGAR COLONY, VAISHALI NAGAR, JAIPUR<br>PH. 0141-4015540                                                                                                                                                       |                   |

SECTION "A-A"  
 NEERAJ KUMAR SINGH  
 Reg. No. CA/2003/32113

### 3 BHK UNIT



FRONT ELEVATION



### BOUNDARY WALL ELEVATION

Architect

NEERAJ KUMAR SINGH

Reg. No. CA/2003/32113

|       |           |         |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   |                                                                                                                                           |                                    |
|-------|-----------|---------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| SIGN. | REVISIONS |         | SCALE            | TITLE:<br><br>PROPOSED RESIDENCE BUILDING                                                                                                                                                                                                                                                                                                                                                                                                                                                   | CLIENT: | PROJECT ARCHITECT | ARCHITECTURAL FIRM:-<br><br> BUILDFORM Design Center |                                    |
|       | R4        |         | DATE             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   |                                                                                                                                           | NAME OF DRAWING:<br><br>SB/BH/A- 1 |
|       | R3        |         |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   |                                                                                                                                           |                                    |
|       | R2        |         |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   |                                                                                                                                           |                                    |
|       | R1        |         |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   |                                                                                                                                           |                                    |
|       | R0        |         |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   |                                                                                                                                           |                                    |
|       |           |         | CHD.             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   | 33-A, VASHISTH MARG, NEEMISAGAR COLONY, VAISHALI NAGAR, JALPURI                                                                           |                                    |
|       |           |         | APPD.            | THIS DRAWING IS THE PROPERTY OF BUILDFORM DESIGN CENTER. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION NOR MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE OUT-LEAED FOR THE PURPOSES OTHER THAN THE SUBMITTED NUMBER. WRITTEN PERMISSION MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART THEREOF SHALL BE OUT-LEAED FOR THE PURPOSES OTHER THAN THE SUBMITTED NUMBER. |         |                   |                                                                                                                                           |                                    |
| S.N.  | DATE      | DETAILS | PH: 0141-4016640 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                   |                                                                                                                                           |                                    |

# CITY HOME-ENCLAVE (PHASE -3)

Khasra NO. 177 OF Village Tanawra At Jodhpur.



## FRONT ELEVATION 3 BHK

| GENERAL NOTES                                                                                                                                                            |  | ASSOCIATES CONSULTANTS |  | REVISION | DATE | PRINTS | ISSUED TO | REMARKS | DRG. TITLE |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|--|----------|------|--------|-----------|---------|------------|
| 1. ALL DIMENSIONS ON THIS DRAWING ARE IN FEET AND INCHES.                                                                                                                |  | STRUCTURAL             |  |          |      |        |           |         | DRG. TITLE |
| 2. ONLY WRITTEN DIMENSIONS ARE TO BE FOLLOWED. DRAWINGS SHOULD NOT BE TOLERATED UNDER ANY CIRCUMSTANCES.                                                                 |  | ELECTRICAL             |  |          |      |        |           |         | SCALE      |
| 3. ALL MEASUREMENTS MUST BE CHECKED AND VERIFIED BY THE CONTRACTORS PRIOR TO EXECUTION OF WORK AT THE SITE.                                                              |  | PLUMBING               |  |          |      |        |           |         | DATE       |
| 4. THIS DRAWING IS TO BE READ IN CONJUNCTION WITH ALL RELEVANT STRUCTURAL, SERVICES & FACILITY PLANNING DRAWINGS.                                                        |  | HVAC                   |  |          |      |        |           |         |            |
| 5. ARCHITECTURAL DRAWINGS ARE TO BE FOLLOWED FOR THE LOCATION OF ALL STRUCTURAL MEMBERS & MASONRY WALLS.                                                                 |  | CLIENT                 |  |          |      |        |           |         |            |
| 6. FOR SIZES & REINFORCEMENT DETAILS OF STRUCTURAL MEMBERS, RELEVANT STRUCTURAL DRAWINGS ARE TO BE REFERRED.                                                             |  | PROJECT TITLE:         |  |          |      |        |           |         |            |
| 7. ANY DISCREPANCIES BETWEEN ARCHITECTURAL, STRUCTURAL AND SERVICES DRAWINGS MUST BE BROUGHT TO THE NOTICE OF THE ARCHITECT IMMEDIATELY & PRIOR TO COMMENCEMENT OF WORK. |  | SITE AT:               |  |          |      |        |           |         |            |
| 8. CO-ORDINATION WITH SERVICES SUCH AS HVAC, PLUMBING & ELECTRICAL, ETC. IS THE RESPONSIBILITY OF THE CONTRACTOR.                                                        |  |                        |  |          |      |        |           |         |            |
| 9. ALL MASONRY WALLS SHOULD BE ALIGNED WITH THE COLUMNS AS INDICATED ON THE PLAN. IMPROPERITY OF THE POSITION IS CALCULATED WITH THE DIMENSIONS.                         |  |                        |  |          |      |        |           |         |            |
| 10. FOR DETAILS, REFER RELEVANT LARGE SCALE DETAIL SHEETS AS INDICATED.                                                                                                  |  |                        |  |          |      |        |           |         |            |

**Architect**  
**NEERAJ KUMAR SINGH**  
Reg. No. CA/2003/32113

**PROJECT ARCHITECT**  
Ar. N.K. SINGH

THIS DRAWING IS THE PROPERTY OF **BUILDFORM STUDIO**. IT SHALL NOT BE COPIED OR USED WITHOUT THEIR WRITTEN PERMISSION NOR MADE KNOWN TO A THIRD PARTY. THE INFORMATION IS ISSUED ON THE UNDERSTANDING THAT NO PART OF THE PROJECT SHALL BE REPRODUCED FOR THE PURPOSE OTHER THAN THE EXPRESSED PURPOSE.

**SIGN**

**ARCHITECTURAL FIRM:**  
**BUILDFORM STUDIO**  
G-348, SAUTAM NAGAR, BLOCK-G, NEAR  
ANARAPALI CIRCLE, VAISHALI NAGAR, JAIPUR-31

PH. 0141-4016649

PH. 0141-4016649