

Other Text Color: Material: Class 1 Route Number Text Color: Black Material: Class 1 Route Number Text Color: Black Material: Class 1 Route Number Text Color; Black Material; Class 1 Other Text Color: Material: Class 1 Character Spacing 98 35 37 36 28 35 38 38 28 35 38 38 38 28 Route Number Text Color: Black Material: Class 1 Route Number Text Color: Black Material: Class 1 Font: DIN B Distance from left: 324 Length: 553 Route Number Text Color: Black Material: Class 1 Other Text Color: Material: Class 1

NOTES AND SPECIFICATIONS

COMPLY WITH SANS 1519-2.

ALL PAINTS TO HAVE GLOSS FINISH AND

ALL WHITE AREAS AND LETTERING TO BE OFF-WHITE IN COLOUR. OFF-WHITE TO BE MADE UP BY ADDING 04. GRAMS BLACK AND 0.4 GRAMS RED PAINT TO ONE LITRE OF PURE WHITE PAINT

COLOUR OF PAINT TO CONFORM TO BS

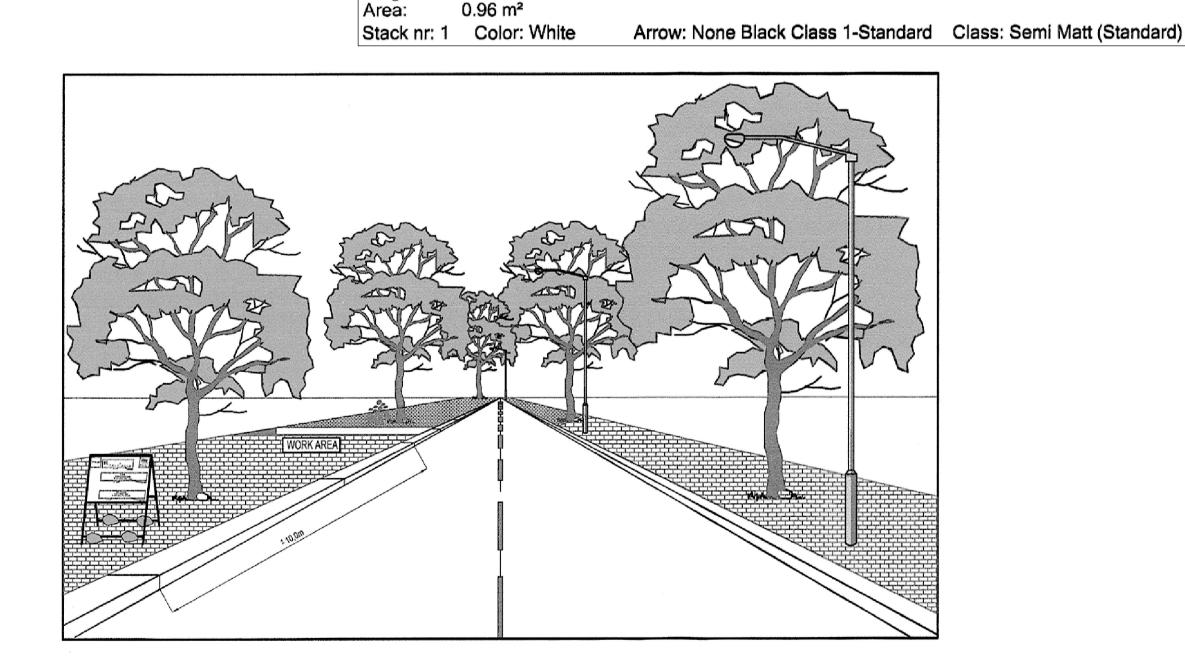
ALL LETTERING ARE 49mm DIN 1451 PART 2 STYLE "B MOD" UNLESS

**GENERAL** 

2000 No.0/013

TRAFFIC SIGNS MANUAL

OTHERWISE INDICATED.

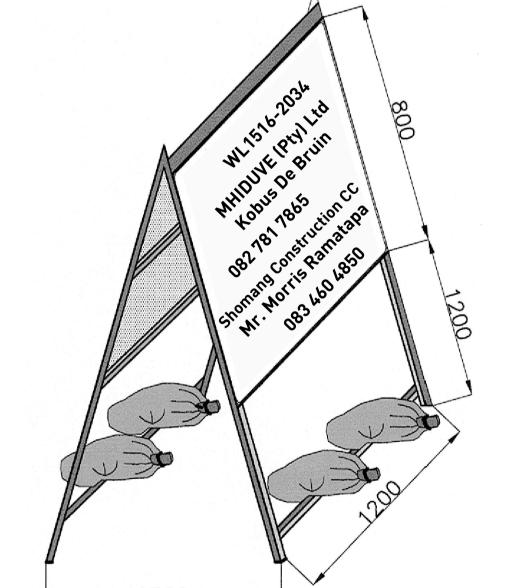


NOTE:

Signface information

Border Radius: 7.00 mm Border Color: White

> 1200.00 mm 800.00 mm



	AME	WATER AND SANITATION FOR INTERNAL APPROVAL - RECEIVED SIGN WHEN APPLICABLE				CONSULTANT DETAIL	DESIGNED  NAME: A. LIEBENBERG Prof Reg No:	CONTRACT No:	PROJECT STATUS RECEIVED SIGN WHEN APPLICABLE	LOCATION OF PROJECT:		
CITY OF TSHWANE IGNITING EXCELLENCE PO BOX 1022 PRETORIA 0001	NR DATE APPROVED	R DATE APPROVED DESCRIPTION		PAR DIRECTOR: WATER AND SANITATION - PLANNING  NAME Prof. Reg. No SIGNATURE DATE				SIGNATURE: DATE:12 JULY 2	PROJECT No	O. CONSERVE APPROVED ASSUME	PRETORIA EXT 14.	
				CTOR: (1,2,3,4,5,6 or 7)			MHIDUVE	NAME: A. LIEBENBERG Prof Reg No:	P16/002 2019 SHEET No.	DRAWING DRAWING CONSTRUCTION DRAWING  DRAWING DRAWING  DRAWING	DESCRIPTION OF PROJECT:	
			NAME DIRECTOR: SYST	Prof. Reg. No TEM DEVELOPMENT		DATE	(Pty)Ltd	CHECKED  NAME: D. SLABBERT Prof Reg No:	1	PROJECT ENGINEER of COT:  NAME: Prof Reg No:		
			NAME DIRECTOR: BULK	Prof. Reg. No SIGNATURE DATE  FOR: BULK WATER  HEF		I, Prof Reg Nr_ HEREBY CERTIFY THAT THE SERVICES WILL\ HAVE BEEN INSTALLE	SIGNATURE: DATE:12 JULY 2019 PAPER SIZE: A1	ZE: NAME: Prot Reg No:  SIGNATURE: DATE:	WLS 1516-2034 : NAME BOARD			
CITY OF TSHWANE			NAME DIRECTOR: INFR	Prof. Reg. No ASTRUCTURE PROVISION		DATE	ACCORDING TO NOTE 9 OF THE ABOVE NOTES AND TO THE DRAWING	NAME: Pr Eng. Prof Reg No:	SCALE:	INSPECTOR OF WORKS of COT:		
WATER AND SANITATION DEPARTMENT			NAME	Prof. Reg. No	SIGNATURE	DATE	SIGNATURE DATE	SIGNATURE: DATE:  DESIGN OFFICE APPROVA	N.T.S.	NAME: Prof Reg No:	WBS No.:	
				DIRECTOR: WASTE WATER TREATMENT			CONSULTANT DRAWING NUMBER:  CP16 / 002 / N001 - 1 / 00	NAME: Prof Reg No:		COT DRAWING NUMBER:		
			NAME	Prof. Reg. No	SIGNATURE	DATE	REVISIO	SIGNATURE: DATE:	12 00 21 20 10	OIONATONE DATE.	·	REVIS