

MAJESTIC SERIES HORIZONTAL HEADWALL SYSTEM

TWO TIER with NO CHASE
(M/N: HW00-02T-P-MXXX)



Install
Instructions

FOR PRESENTATION
PURPOSES ONLY
Sep-17-2025
NOT FOR
CONSTRUCTION USE

DRAWING # 00

TYPE: PATIENT ROOM
QUANTITY: 00

IF MIRRORED UNITS ARE REQUIRED, THE
CUSTOMER MUST INDICATE THE QUANTITY
BELOW

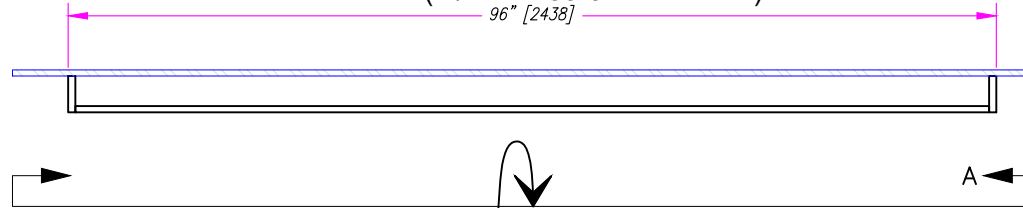
QTY MIRRORED: _____

SYSTEM DETAILS

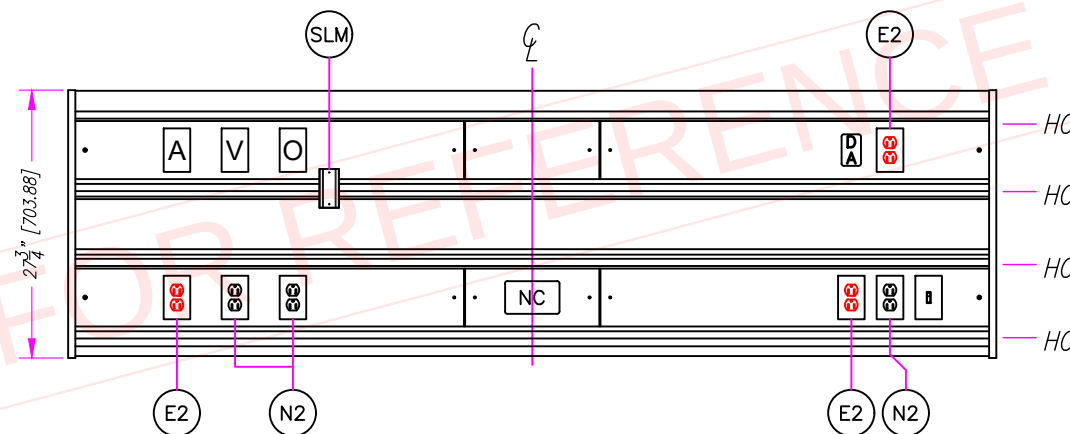
SYM	QTY	DESCRIPTION
HC	4	HORIZONTAL CHANNEL
O	1	AMICO GAS OUTLET, OXYGEN
A	1	AMICO GAS OUTLET, MED AIR
V	1	AMICO GAS OUTLET, VACUUM
E2	3	RECEPTACLE - DUPLEX RED
N2	3	RECEPTACLE - DUPLEX IVORY
SN1	1	SWITCH - S.P.S.T. IVORY
NC	1	PROVISION - NURSE CALL 3G
DA	1	PROVISION - DATA 1G
SLM	1	VACUUM SLIDE

IMPORTANT NOTES:

- MAINTAIN A MINIMUM SPACING OF 3" C/C BETWEEN LOW VOLTAGE DEVICES, POWER OUTLETS, AND SWITCHES.
- MAINTAIN A MINIMUM SPACING OF 5" C/C BETWEEN GAS OUTLETS.
- NURSE CALL DEVICES MUST MAINTAIN A MINIMUM SPACING OF 6" C/C FROM OTHER SERVICES DUE TO THE SIZE OF THE DEVICE FACE
- FOR VERTICAL GRAIN DIRECTION LAMINATE, A LAMINATE DIVIDER IS REQUIRED EVERY 47.5" (C/C) OF LAMINATE LENGTH.
- DO NOT PLACE ANY SERVICES WITHIN 3" SPACING FROM THE LAMINATE DIVIDER.
- MRI UNITS ARE AVAILABLE ONLY IN 1T SURFACE-MOUNTED MAJESTIC MODELS, SIZED 48" AND 60".



CEILING LINE



VIEW A-A

FINISHED FLOOR LINE

IMPORTANT: PLEASE VERIFY THAT THE ABOVE INFORMATION IS
CORRECT, AND PROVIDE THE REMAINING DETAILS.

APPROVAL - PRINT AND SIGNATURE

DATE

PHONE NO.

HOSPITAL	HOSPITAL	NURSE CALL	MFGR. : TBC	MODEL No. : TBC	 www.amico.com	85 Fulton Way Richmond Hill, Ontario L4B 2N4, CANADA Toll-Free: 1-877-462-6436(T) 1-866-440-6986(F) Tel: (905) 764-0800 Fax: (905) 764-0862	QUOTE No. REV. BY: RJUSAYAN PROJECT PM: DATE: Sep-17-2025 REV. NO:
LOCATION	LOCATION	GAS OUTLETS	MFGR. : AMICO	TYPE CONNECTION : TBC			
UNIT AS SHOWN - N.T.S.		FINISH	TBC	CEILING HEIGHT			
					N/A		

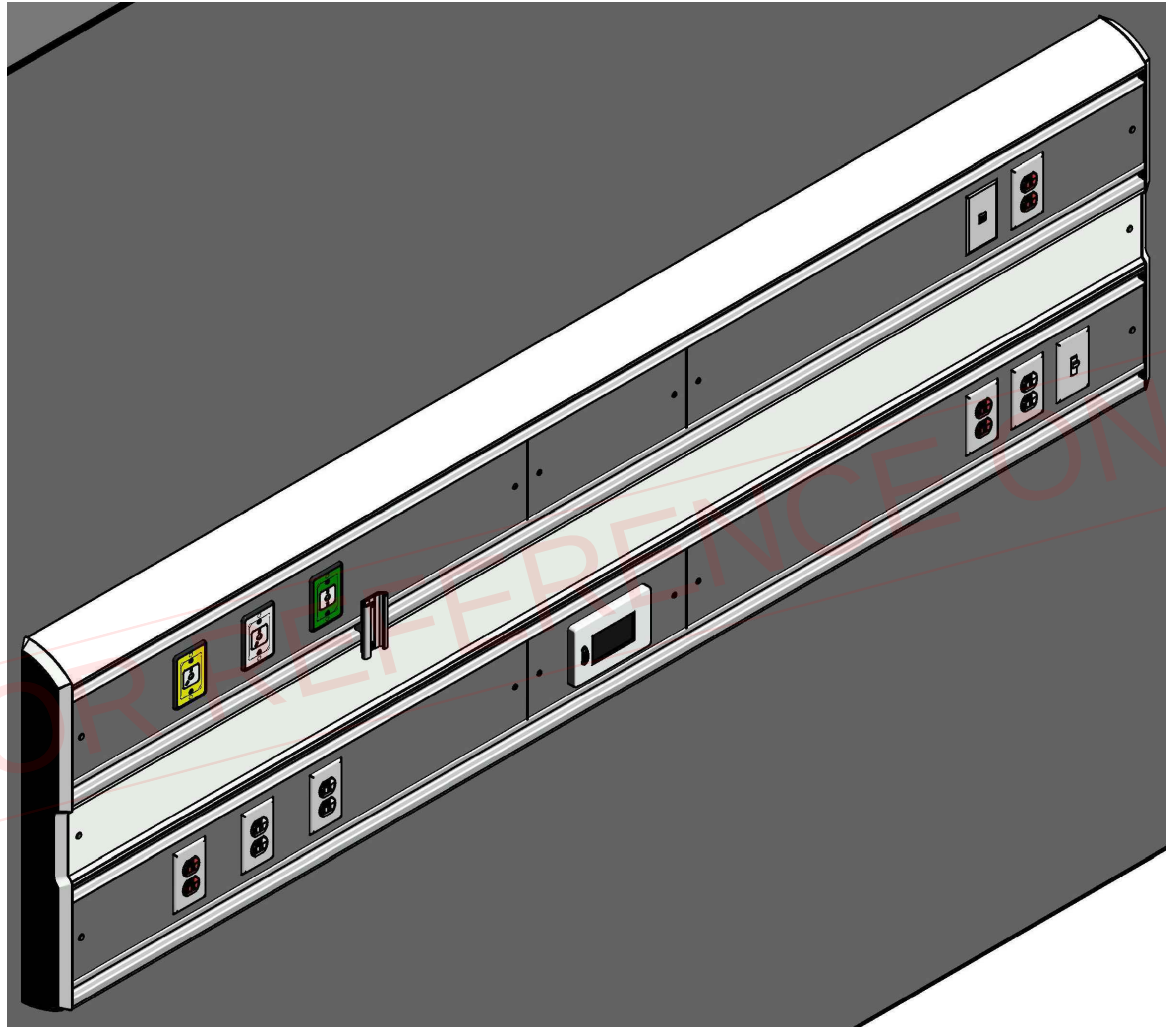
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SINGLE SIDED UNIT DETAIL



SINGLE SIDED AS SHOWN SIDE

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