

D

C

B

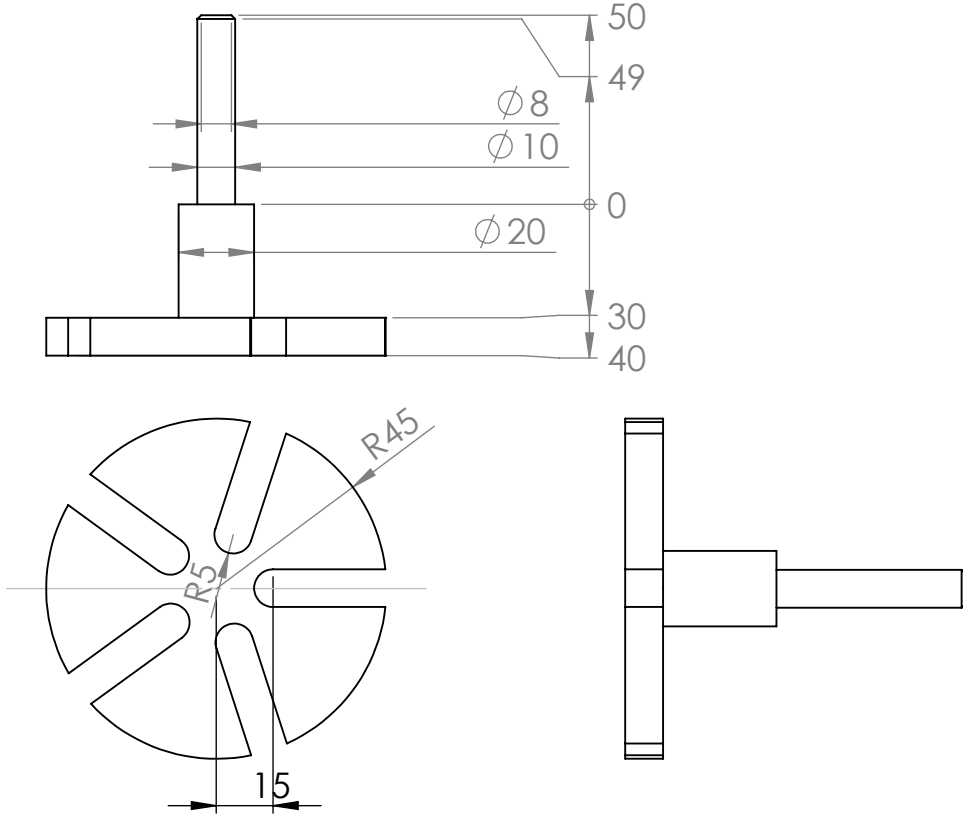
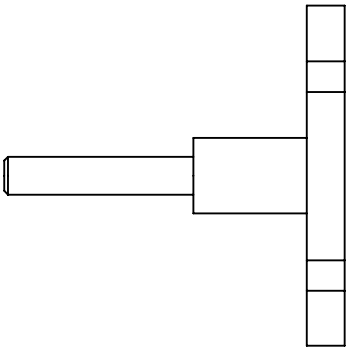
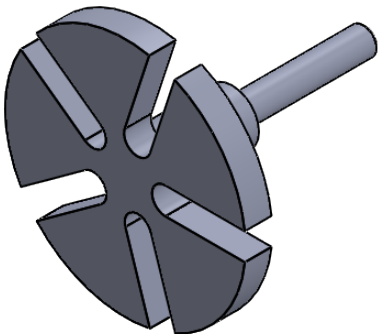
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A



|                                                                                                                             |            |           |            |           |  |  |                           |  |                          |  |                 |
|-----------------------------------------------------------------------------------------------------------------------------|------------|-----------|------------|-----------|--|--|---------------------------|--|--------------------------|--|-----------------|
| SAUF INDICATION CONTRAIRE:<br>LES COTES SONT EN MILLIMETRES<br>ETAT DE SURFACE:<br>TOLERANCES:<br>LINEAIRES:<br>ANGULAIRES: |            |           |            | FINITION: |  |  | CASSER LES<br>ANGLES VIFS |  | NE PAS CHANGER L'ECHELLE |  | REVISION        |
|                                                                                                                             |            |           |            |           |  |  |                           |  |                          |  |                 |
|                                                                                                                             | NOM        | SIGNATURE | DATE       |           |  |  |                           |  | TITRE:                   |  |                 |
| AUTEUR                                                                                                                      | T.Ghadbane |           | 28-10-2025 |           |  |  |                           |  |                          |  |                 |
| VERIF.                                                                                                                      |            |           |            |           |  |  |                           |  |                          |  |                 |
| APPR.                                                                                                                       |            |           |            |           |  |  |                           |  |                          |  |                 |
| FAB.                                                                                                                        |            |           |            |           |  |  |                           |  |                          |  |                 |
| QUAL.                                                                                                                       |            |           |            |           |  |  |                           |  | No. DE PLAN              |  |                 |
|                                                                                                                             |            |           |            |           |  |  |                           |  |                          |  |                 |
|                                                                                                                             |            |           |            |           |  |  |                           |  | plateau a rainure A4     |  |                 |
|                                                                                                                             |            |           |            |           |  |  |                           |  |                          |  |                 |
|                                                                                                                             |            |           |            |           |  |  |                           |  | ECHELLE:1:2              |  | FEUILLE 1 SUR 1 |