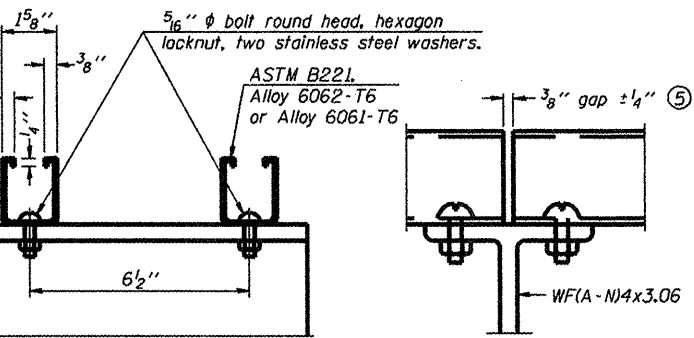
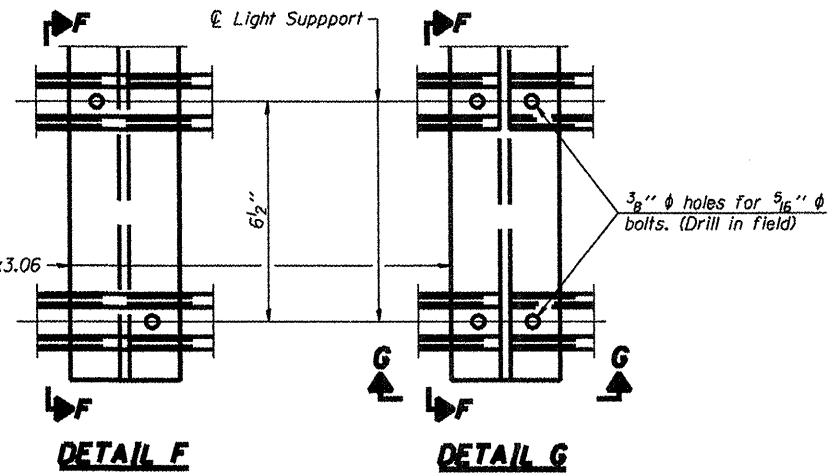


① Install standard force-fit end caps or weld 1/8" end plates with 1/8" c.f.w. and grind smooth. (All rail ends)

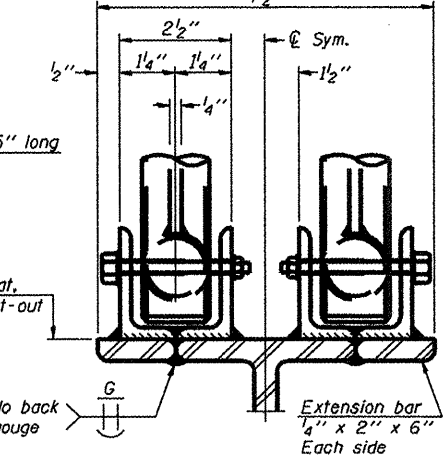
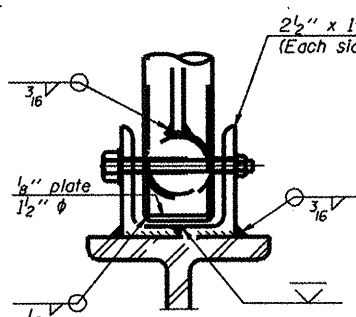
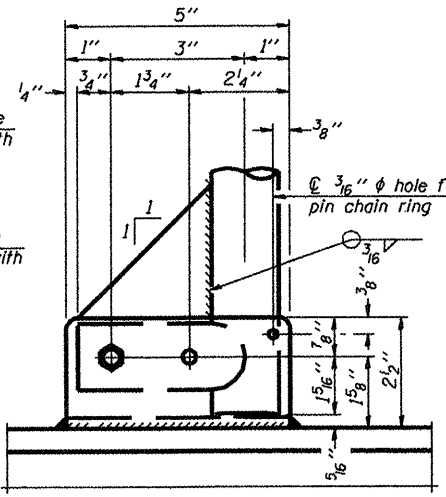
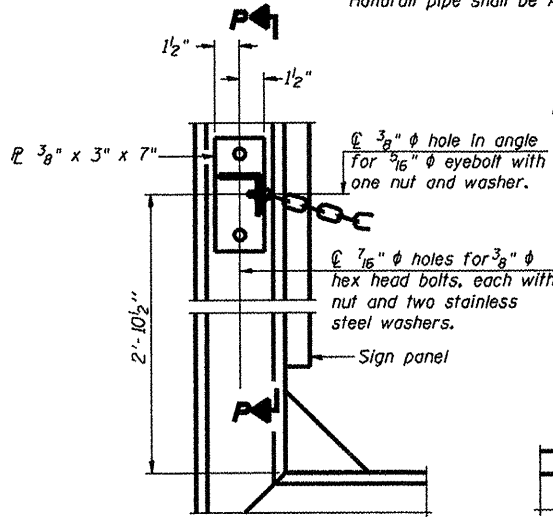
Fittings-ASTM B26, Alloy 356-T7 or 1/2" aluminum pipe

② Horizontal handrail member shall be continuous thru fitting. Provide 7/16" hole in fitting for 3/8" bolt. Field drill 1/16" hole in horizontal rail member. Provide locknut and two stainless steel washers for bolt. (Use 3/16" eyebolts in 1/16" holes on top rail at ends only.)

**HANDRAIL DETAILS**  
Handrail pipe shall be ASTM B241 or B429, Alloy 6063-T6 or Alloy 6061-T6.



**SECTION F-F**  
**SECTION G-G**  
**LIGHTING FIXTURE MOUNTS (IF REQUIRED)**  
⑤ Field cut ends of light support channels shall be free of burrs or hazardous projections and coated with zinc-rich primer or equivalent.

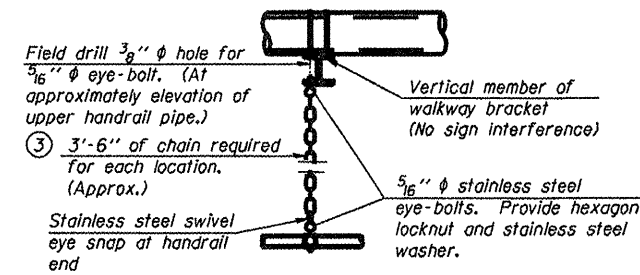
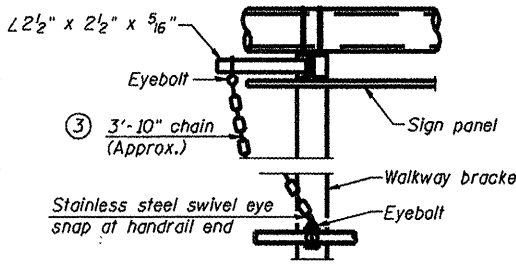
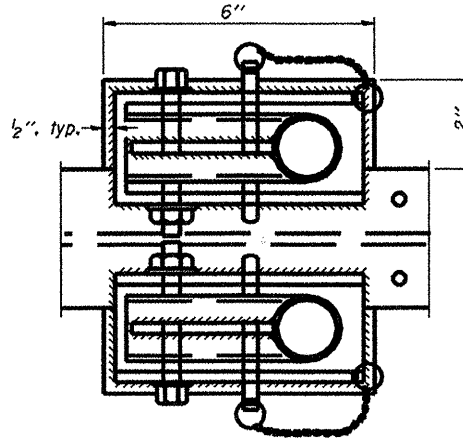
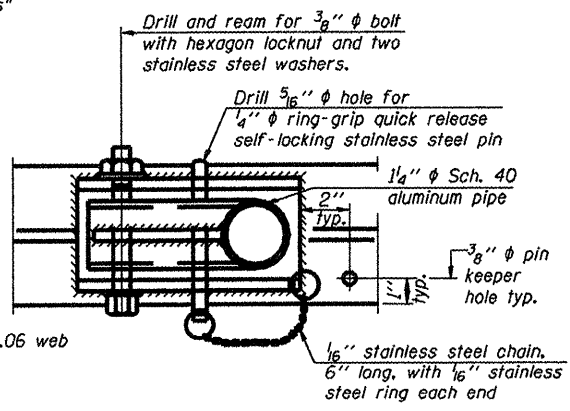
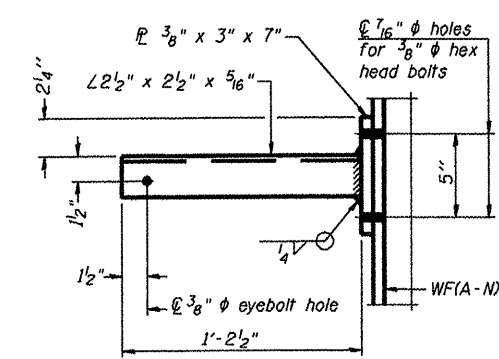


**ALTERNATE SAFETY CHAIN ATTACHMENT**  
(With Sign Present)  
Items not shown same as "Side Elevation" of "Handrail Details"

**SIDE ELEVATION**

**FRONT ELEVATION**  
See "Elevation" at right for dimensions.

**ELEVATION AT HANDRAIL JOINT** ④



**ALTERNATE SAFETY CHAIN ATTACHMENT**  
Details not shown similar to "Safety Chain" Details (Walkway omitted for clarity)

③ 3/16" Type 304L stainless steel chain, approximately 12 links per foot.

④ Extrusions may be used in lieu of the details shown, with approval of the Engineer.

**SAFETY CHAIN**  
One required for each end of each walkway.

OS-A-11 1-20-11

FILE NAME =	USER NAME = linkd	DESIGNED -	REVISED -	STATE OF ILLINOIS DEPARTMENT OF TRANSPORTATION	OVERHEAD SIGN STRUCTURES ALUMINUM HANDRAIL DETAILS	F.A. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.
ONBRV\SIGN TRUSS\CADD Plans\2011-2 connect\PLANeng.dgn		DRAWN -	REVISED -			var 0-2 OVD SIM STR REPL 12-03	VARIOUS	28	13	
PLOT SCALE = 1/8" = 1'-0"		CHECKED -	REVISED -			CONTRACT NO. 46176				
PLOT DATE = Wed Apr 06 15:38:22 2011		DATE -	REVISED -			ILLINOIS FED. AID PROJECT				
						SCALE: _____	SHEET NO. _____ OF _____ SHEETS	STA. _____ TO STA. _____		