



DETAIL:	ARCHITECTURAL REF:	DESCRIPTION:		
QUANTITY, THIS DETAIL _____ TOTAL LF	MATERIAL	CORNER TYPE	FINISH	
	<input type="checkbox"/> ALUMINUM <input type="checkbox"/> GALVANIZED <input type="checkbox"/> _____	<input type="checkbox"/> FACTORY FABRICATED <input type="checkbox"/> CORNERS ARE NOT AVAILABLE.	<input type="checkbox"/> MILL FINISH <input type="checkbox"/> PREFINISHED KYNAR <input type="checkbox"/> POST FINISHED KYNAR <input type="checkbox"/> PREFINISHED ANODIZE <input type="checkbox"/> POST FINISHED ANODIZE <input type="checkbox"/> _____	
	THICKNESS	COLOR _____		
	<input type="checkbox"/> .032 <input type="checkbox"/> 24 GA <input type="checkbox"/> _____			
Transmittal <input type="checkbox"/> REQUEST FOR QUOTATION <input type="checkbox"/> SUBMIT FOR APPROVAL <input type="checkbox"/> REQUEST FOR INFORMATION <input type="checkbox"/> CONFIRMING TELECONFERENCE <input type="checkbox"/> FOR YOUR FILES By _____ Date _____		Customer Approval <input type="checkbox"/> APPROVED FOR FABRICATION <input type="checkbox"/> APPROVED AS NOTED <input type="checkbox"/> AMEND & RESUBMIT _____ Authorized Customer Signature _____ Title _____ Date _____		
Job Name			Job #	
Location			Sheet of	
Customer			By	
Representative			Date	
Architect				