



Customer: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Overall Building Size: Width \_\_\_\_\_ Ft. X Length \_\_\_\_\_ Ft.

Module Sizes: Quantity \_\_\_\_\_ Width \_\_\_\_\_ Ft. X Length \_\_\_\_\_ Ft.  FTD

Quantity \_\_\_\_\_ Width \_\_\_\_\_ Ft. X Length \_\_\_\_\_ Ft.

Quantity \_\_\_\_\_ Width \_\_\_\_\_ Ft. X Length \_\_\_\_\_ Ft.

Quantity \_\_\_\_\_ Width \_\_\_\_\_ Ft. X Length \_\_\_\_\_ Ft.

Usage: \_\_\_\_\_ Location: \_\_\_\_\_ State: \_\_\_\_\_

Project Name: \_\_\_\_\_

**GENERAL CONSTRUCTION SPECIFICATIONS**

NOTE: ( \_\_\_\_\_ ) = Enter quantity of item selected FTD = Factory To Determine

**FRAMES**

<b>TYPE</b>	<input type="checkbox"/> True Modular <input type="checkbox"/> Outrigger <input type="checkbox"/> No frame <span style="float: right;"><input type="checkbox"/> FTD</span>
	<input type="checkbox"/> Perimeter w/integral steel crossmembers <input type="checkbox"/> Perimeter (Old style w/wood joists on top)
<b>BEAM SIZE</b>	<input type="checkbox"/> 6 inch <input type="checkbox"/> 8 inch <input type="checkbox"/> 10 inch <input type="checkbox"/> 12 inch <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>HITCH</b>	<input type="checkbox"/> Detachable <input type="checkbox"/> Pintle eye <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>AXLES</b>	<input type="checkbox"/> Single <input type="checkbox"/> Tandem <input type="checkbox"/> Triple <input type="checkbox"/> Quad <input type="checkbox"/> 5 axles <input type="checkbox"/> 6 axles <input type="checkbox"/> 7axles <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>OTHER</b>	

**FLOOR CONSTRUCTION**

<b>BOTTOM BOARD</b>	<input type="checkbox"/> .040 Asphalt <input type="checkbox"/> 30 GA. Steel <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>JOISTS</b>	<input type="checkbox"/> 2 X 6 <input type="checkbox"/> 2 X 8 <input type="checkbox"/> 2 X 10 <input type="checkbox"/> 2 X 12 <input type="checkbox"/> 2 X 3 Nailer @ ( _____ ) in. O.C. <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>SUB-FLOOR</b>	<input type="checkbox"/> 5/8 in. Ply <input type="checkbox"/> 3/4 in. Ply <input type="checkbox"/> 1 1/8 in. Ply <input type="checkbox"/> Single <input type="checkbox"/> Double <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>COVERING</b>	<input type="checkbox"/> N/A <input type="checkbox"/> ( _____ ) sf VC Tile <input type="checkbox"/> ( _____ ) sf Roll goods <input type="checkbox"/> ( _____ ) sf carpet <input type="checkbox"/> 20 oz. <input type="checkbox"/> 26 oz. <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>INSULATION</b>	<input type="checkbox"/> R-11 <input type="checkbox"/> R-19 <input type="checkbox"/> R-22 <input type="checkbox"/> R-30 <input type="checkbox"/> Kraft <input type="checkbox"/> Unfaced <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>BASE TRIM</b>	<input type="checkbox"/> N/A <input type="checkbox"/> 1 in. prefinished batten <input type="checkbox"/> 2 in. Prefinished wood <input type="checkbox"/> 4 in. Vinyl <input type="checkbox"/> 4 in. Rubber <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>UNDERLAYMENT</b>	<input type="checkbox"/> 1/4 in. Hardibacker or equal <input type="checkbox"/> 1/4 in. wood <span style="float: right;"><input type="checkbox"/> FTD</span>
<b>OTHER</b>	



EXTERIOR WALL CONSTRUCTION							
<b>STUDS</b>	<input type="checkbox"/> Wood	<input type="checkbox"/> Steel	<input type="checkbox"/> 2 X 4	<input type="checkbox"/> 2 X 6	Wind Load (____) mph Exposure (A,B,C) (____)	<input type="checkbox"/> FTD	
<b>SHEATHING</b>	<input type="checkbox"/> N/A	<input type="checkbox"/> Zip system (For site applied finish)		<input type="checkbox"/> 3/8 Plywood	<input type="checkbox"/> 1/2 Plywood	<input type="checkbox"/> Densglass	<input type="checkbox"/> FTD
<b>WALL FINISH</b>	<input type="checkbox"/> 3/8 <input type="checkbox"/> 1/2 <input type="checkbox"/> 5/8 <input type="checkbox"/> Vinyl Gyp. <input type="checkbox"/> 1/4 Vinyl paneling <input type="checkbox"/> 1/4 Woodgrain paneling					<input type="checkbox"/> FTD	
	<input type="checkbox"/> FRP laminated to MR board <input type="checkbox"/> Raw Gyp. <input type="checkbox"/> T.T. paint						
<b>INSULATION</b>	<input type="checkbox"/> N/A	<input type="checkbox"/> R-11	<input type="checkbox"/> R13	<input type="checkbox"/> R-15	<input type="checkbox"/> R-19	<input type="checkbox"/> R-21	<input type="checkbox"/> FTD
<b>SIDING</b>	<input type="checkbox"/> N/A	<input type="checkbox"/> .019 Aluminum	<input type="checkbox"/> 26 GA Steel	<input type="checkbox"/> Hardi Panel	<input type="checkbox"/> LP Smart Side	<input type="checkbox"/> LP Lap siding	<input type="checkbox"/> FTD
<b>OTHER</b>							
INTERIOR WALL CONSTRUCTION							
<b>STUDS</b>	<input type="checkbox"/> Wood	<input type="checkbox"/> Steel	<input type="checkbox"/> 2 X 3	<input type="checkbox"/> 2 X 4	<input type="checkbox"/> 2 X 6	@ (____) in. O.C.	<input type="checkbox"/> FTD
	Wall height (____)		<input type="checkbox"/> Extend wall to rafter				
<b>WALL FINISH</b>	<input type="checkbox"/> 3/8 <input type="checkbox"/> 1/2 <input type="checkbox"/> 5/8 <input type="checkbox"/> Vinyl Gyp. <input type="checkbox"/> 1/4 Vinyl paneling <input type="checkbox"/> 1/4 Woodgrain paneling					<input type="checkbox"/> FTD	
	<input type="checkbox"/> Full height FRP laminated to MR board <input type="checkbox"/> Raw Gyp. <input type="checkbox"/> T.T. paint <input type="checkbox"/> FRP @ 4' 0"					<input type="checkbox"/> FTD	
<b>INSULATION</b>	<input type="checkbox"/> R-11 <input type="checkbox"/> 1/2 in. Sound Board					<input type="checkbox"/> FTD	
<b>OTHER</b>							
ROOF CONSTRUCTION							
<b>ROOF SLOPE</b>	<input type="checkbox"/> Single slope <input type="checkbox"/> Mono/gable <input type="checkbox"/> Transverse <input type="checkbox"/> Gable slope (____) <input type="checkbox"/> For EPDM					<input type="checkbox"/> FTD	
	Snow load (____) psf					<input type="checkbox"/> FTD	
<b>SHEATHING</b>	<input type="checkbox"/> 1/2 Plywood <input type="checkbox"/> 5/8 Plywood <input type="checkbox"/> FR Deck for EPDM					<input type="checkbox"/> FTD	
<b>CEILING</b>	<input type="checkbox"/> N/A <input type="checkbox"/> Sprayed Acoustic <input type="checkbox"/> 1/2 Raw Gyp. <input type="checkbox"/> 5/8 Raw Gyp.					<input type="checkbox"/> FTD	
	<input type="checkbox"/> T-Grid	<input type="checkbox"/> 2' x 2'	<input type="checkbox"/> 2' x 4'	<input type="checkbox"/> CeramaGuard	<input type="checkbox"/> HumiGuard	<input type="checkbox"/> Mineral fiber	<input type="checkbox"/> FTD
	Ceiling height <input type="checkbox"/> 7' 10" <input type="checkbox"/> 8' 6" <input type="checkbox"/> 8' 10"					<input type="checkbox"/> FTD	
<b>INSULATION</b>	<input type="checkbox"/> R-19	<input type="checkbox"/> R-22	<input type="checkbox"/> R-30	<input type="checkbox"/> R-38	<input type="checkbox"/> Kraft <input type="checkbox"/> Unfaced	<input type="checkbox"/> FTD	
<b>ROOFING</b>	<input type="checkbox"/> 30 GA. Roll <input type="checkbox"/> Hi Rib enameled steel <input type="checkbox"/> Galvalume <input type="checkbox"/> Shingles					<input type="checkbox"/> FTD	
	<input type="checkbox"/> Rubber (EPDM) <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> 45 mil <input type="checkbox"/> 60 mil						
<b>MANSARDS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> False w/6" overhang on end walls <input type="checkbox"/> Full mansard height (____) in.					<input type="checkbox"/> FTD	
	<input type="checkbox"/> Designer style		<input type="checkbox"/> Concealed gutters w/exposed downspouts		<input type="checkbox"/> Covering (____) in.	<input type="checkbox"/> Projection (____) in.	



<b>PARAPETS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> Leveling parapet w/scuppers, collection boxes, and downspouts <input type="checkbox"/> FTD
<b>OTHER</b>	
<b>EXTERIOR DOORS</b>	
<b>TYPE</b>	<input type="checkbox"/> ( ) 36 X 80 <input type="checkbox"/> ( ) 72 X 80 DBL <input type="checkbox"/> ( ) Storefront <input type="checkbox"/> ( ) Roll up <input type="checkbox"/> ( ) Frame only <input type="checkbox"/> FTD <input type="checkbox"/> ( ) Tell Star 20 GA Steel <input type="checkbox"/> ( ) 18 GA Steel w/ 16 GA jamb
<b>VISION PANEL</b>	<input type="checkbox"/> N/A <input type="checkbox"/> ( ) Block <input type="checkbox"/> ( ) Pencil <input type="checkbox"/> ( ) Half lite <input type="checkbox"/> ( ) Full view <input type="checkbox"/> FTD
<b>HARDWARE</b>	<input type="checkbox"/> ( ) Passage lever <input type="checkbox"/> ( ) Deadbolt <input type="checkbox"/> ( ) Panic <input type="checkbox"/> ( ) Closer <input type="checkbox"/> FTD <input type="checkbox"/> ( ) Push/Pull <input type="checkbox"/> ( ) Kick plate <input type="checkbox"/> ( ) Locking lever
<b>OTHER</b>	
<b>INTERIOR DOORS</b>	
<b>TYPE</b>	<input type="checkbox"/> N/A <input type="checkbox"/> ( ) 24 X 80 <input type="checkbox"/> ( ) 32 X 80 <input type="checkbox"/> ( ) 36 X 80 <input type="checkbox"/> ( ) Fire rated <input type="checkbox"/> ( ) _____ <input type="checkbox"/> FTD <input type="checkbox"/> ( ) H. C. <input type="checkbox"/> ( ) S. C. <input type="checkbox"/> ( ) Jamless <input type="checkbox"/> ( ) Pre-hung <input type="checkbox"/> ( ) Steel jamb (Timely or Ready)
<b>HARDWARE</b>	<input type="checkbox"/> ( ) Lever <input type="checkbox"/> ( ) Passage <input type="checkbox"/> ( ) Privacy <input type="checkbox"/> ( ) Keyed <input type="checkbox"/> FTD <input type="checkbox"/> ( ) Push/Pull <input type="checkbox"/> ( ) Closer <input type="checkbox"/> ( ) Kick plate
<b>OTHER</b>	
<b>WINDOWS</b>	
<b>STANDARD SIZES</b>	<input type="checkbox"/> N/A <input type="checkbox"/> ( ) 24 x 52 VS <input type="checkbox"/> ( ) 32 x 60 VS <input type="checkbox"/> ( ) 48 x 24 HS <input type="checkbox"/> ( ) 60 x 24 HS <input type="checkbox"/> FTD <input type="checkbox"/> ( ) 46 x 40 HS <input type="checkbox"/> ( ) 48 x 36 HS (all dual glass w/low E glazing)
<b>ALTERNATE SIZES</b>	<input type="checkbox"/> ( ) ___ x ___ <input type="checkbox"/> ( ) ___ x ___ <input type="checkbox"/> ( ) ___ x ___ <input type="checkbox"/> FTD
<b>FRAMES</b>	<input type="checkbox"/> ( ) Aluminum frame <input type="checkbox"/> ( ) Bronze finish <input type="checkbox"/> ( ) Mill finish <input type="checkbox"/> FTD <input type="checkbox"/> ( ) Vinyl frame <input type="checkbox"/> ( ) Storefront <input type="checkbox"/> ( ) Divided lite (cottage)
<b>SPECIALTY</b>	<input type="checkbox"/> ( ) Interior security bars <input type="checkbox"/> ( ) Impact resistant <input type="checkbox"/> ( ) Tempered glazing <input type="checkbox"/> FTD <input type="checkbox"/> ( ) Mini blinds - metal
<b>OTHER</b>	



<b>ELECTRICAL</b>	
<b>LOAD CENTER</b>	<input type="checkbox"/> N/A (____) Amp _____ <input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Single phase <input type="checkbox"/> Three phase <input type="checkbox"/> FTD
<b>LIGHTS (FLUOR.)</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) 4 ft. 4 tube <input type="checkbox"/> (____) 4 ft. 3 tube <input type="checkbox"/> (____) 4 ft. 2 tube <input type="checkbox"/> FTD
	<input type="checkbox"/> (____) 2 ft. x 2 ft. <input type="checkbox"/> (____) Parabolic <input type="checkbox"/> (____) Diffused
<b>LIGHTS (OTHER)</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) Recessed can <input type="checkbox"/> (____) 6" Drum <input type="checkbox"/> (____) Vanity light at lavatory <input type="checkbox"/> FTD
	<input type="checkbox"/> (____) Surface mounted
<b>EXTERIOR LIGHTS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) 13 watt porch w/photo cell <input type="checkbox"/> (____) 23 watt vandal resistant w/photo cell <input type="checkbox"/> FTD
	<input type="checkbox"/> (____) HPS ____ watt w/photo cell <input type="checkbox"/> (____) Metal halide
<b>RECEPTACLES</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) 110v duplex <input type="checkbox"/> (____) 220v ____ amp stove <input type="checkbox"/> (____) 220v ____ amp dryer <input type="checkbox"/> FTD
	<input type="checkbox"/> (____) GFCI <input type="checkbox"/> (____) W.P. <input type="checkbox"/> (____) H.T. <input type="checkbox"/> (____) Dedicated <input type="checkbox"/> (____) Floor <input type="checkbox"/> (____) Quad
	<input type="checkbox"/> (____) Isolated ground <input type="checkbox"/> (____) Hospital grade <input type="checkbox"/> (____) Other _____
	<input type="checkbox"/> (____) Powered J-box above T-grid
<b>RACEWAY</b>	<input type="checkbox"/> Copper Romex <input type="checkbox"/> MC cable <input type="checkbox"/> EMT conduit <input type="checkbox"/> FTD
<b>PHONE / DATA</b>	<input type="checkbox"/> (____) stubbed up <input type="checkbox"/> (____) stubbed down <input type="checkbox"/> (____) Alarms stubbed up <input type="checkbox"/> FTD
<b>EXIT / EMERGENCY</b>	<input type="checkbox"/> (____) Exit light w/battery backup <input type="checkbox"/> (____) Combo exit/emergency <input type="checkbox"/> (____) Dual head emergency <input type="checkbox"/> FTD
	<input type="checkbox"/> (____) Emergency ballast <input type="checkbox"/> (____) Exterior w/battery backup
<b>OTHER</b>	
<b>PLUMBING</b>	
<b>WATER CLOSETS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) Standard <input type="checkbox"/> (____) Elongated <input type="checkbox"/> (____) Handicap <input type="checkbox"/> (____) Child <input type="checkbox"/> FTD
<b>MODESTY PART.</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) Steel <input type="checkbox"/> (____) Laminated <input type="checkbox"/> (____) _____ <input type="checkbox"/> FTD
<b>URINALS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) Wall hung <input type="checkbox"/> FTD
<b>MODESTY BLINDS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) Steel <input type="checkbox"/> (____) Laminated <input type="checkbox"/> FTD
<b>LAVATORIES</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) Wall hung (ADA) <input type="checkbox"/> (____) Vanity (non-ADA) <input type="checkbox"/> (____) Countertop (ADA) <input type="checkbox"/> FTD
<b>WATER HTR.</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) ____ gallon tank <input type="checkbox"/> (____) Insta-hot <input type="checkbox"/> FTD
<b>SHOWER</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) Standard 36 x 36 w/rod <input type="checkbox"/> (____) Hdcp. 38 x 38 w/rod <input type="checkbox"/> FTD
	<input type="checkbox"/> (____) 36 x 36 w/door <input type="checkbox"/> (____) Tub/shower
<b>ACCESSORIES</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (____) TP holders <input type="checkbox"/> (____) Towel dispenser <input type="checkbox"/> (____) Combo towel dispenser / trash receptacle <input type="checkbox"/> FTD
	<input type="checkbox"/> (____) Soap dish <input type="checkbox"/> (____) Grab bars <input type="checkbox"/> (____) Mirrors (clip) <input type="checkbox"/> (____) Mirrors (SS frame)



	<input type="checkbox"/> (___) Napkin dispenser w/napkin disposal			
<b>SINKS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (___) Bar <input type="checkbox"/> (___) Single SS <input type="checkbox"/> (___) Double SS <input type="checkbox"/> (___) Floor drain <input type="checkbox"/> FTD			
	<input type="checkbox"/> (___) Mop sink w/legs <input type="checkbox"/> (___) Floor mounted mop sink <input type="checkbox"/> (___) Hose bibb			
<b>DRINKING FTN.</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (___) Handicap Hi-Lo <input type="checkbox"/> (___) Bubbler <input type="checkbox"/> (___) Standard <input type="checkbox"/> FTD			
	<input type="checkbox"/> (___) Ice maker valve box <input type="checkbox"/> (___) Washer box			
<b>OTHER</b>				
<b>HVAC</b>				
<b>TYPE</b>	<input type="checkbox"/> N/A <input type="checkbox"/> End mount <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Thru wall	<input type="checkbox"/> Single phase <input type="checkbox"/> Three phase	<input type="checkbox"/> FTD	
<b>A/C (ELEC HEAT)</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (___) 1 ton 5 KW <input type="checkbox"/> (___) 1 1/2 ton 5 KW <input type="checkbox"/> (___) 2 ton 10 KW <input type="checkbox"/> (___) 2 1/2 ton 10 KW <input type="checkbox"/> FTD			
	<input type="checkbox"/> (___) 3 ton 10 KW <input type="checkbox"/> (___) 3 ton 15 KW <input type="checkbox"/> (___) 3 1/2 ton 10 KW <input type="checkbox"/> (___) 3 1/2 ton 15 KW			
	<input type="checkbox"/> (___) 4 ton 10 KW <input type="checkbox"/> (___) 4 ton 15 KW <input type="checkbox"/> (___) 5 ton 10 KW <input type="checkbox"/> (___) 5 ton 15 KW			
	<input type="checkbox"/> (___) 5 ton 205 KW			
<b>A/C (GAS HEAT)</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (___) 2 1/2 ton ___ BTU <input type="checkbox"/> (___) 3 ton ___ BTU <input type="checkbox"/> (___) 4 ton ___ BTU	<input type="checkbox"/> FTD		
<b>SUPPLY DUCT</b>	<input type="checkbox"/> N/A <input type="checkbox"/> Galvanized <input type="checkbox"/> Fiberglass <input type="checkbox"/> (___) 24 x 24 grills <input type="checkbox"/> (___) 14 x 8 grills	<input type="checkbox"/> FTD		
<b>RETURN AIR</b>	<input type="checkbox"/> N/A <input type="checkbox"/> Wall jump <input type="checkbox"/> Thru wall <input type="checkbox"/> Filtered grill <input type="checkbox"/> At unit <input type="checkbox"/> Fully ducted	<input type="checkbox"/> FTD		
<b>PLENUM WALL</b>	<input type="checkbox"/> N/A <input type="checkbox"/> Yes	<input type="checkbox"/> FTD		
<b>EXHAUST FANS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (___) 70 CFM Combo <input type="checkbox"/> (___) 110 CFM <input type="checkbox"/> (___) 180 CFM <input type="checkbox"/> (___) 350 CFM	<input type="checkbox"/> FTD		
<b>OTHER</b>				
<b>CABINETS</b>				
<b>CABINETS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (___) LF Base cabinet <input type="checkbox"/> (___) LF Overhead cabinet <input type="checkbox"/> (___) LF Countertop <input type="checkbox"/> FTD			
	<input type="checkbox"/> Wood front <input type="checkbox"/> High pressure laminate front			
<b>SHELVING</b>	<input type="checkbox"/> N/A <input type="checkbox"/> (___) LF of ___ x ___	<input type="checkbox"/> Fixed <input type="checkbox"/> Adjustable	<input type="checkbox"/> Painted pwd <input type="checkbox"/> Wire	<input type="checkbox"/> FTD
<b>OTHER</b>				
<b>LABELS</b>				
<b>STATE SEAL</b>	<input type="checkbox"/> N/A <input type="checkbox"/> TX <input type="checkbox"/> LA <input type="checkbox"/> CO <input type="checkbox"/> MO <input type="checkbox"/> NM <input type="checkbox"/> AZ <input type="checkbox"/> FTD			
<b>PROFESSIONAL STAMPED DRAWINGS</b>	<input type="checkbox"/> N/A <input type="checkbox"/> OK <input type="checkbox"/> AR <input type="checkbox"/> KS <input type="checkbox"/> MS <input type="checkbox"/> Other <input type="checkbox"/> FTD			



OTHER	
<b>OPTIONS AND COMMENTS</b>	