

# SHOP DRAWING/ ENGINEERING REQUEST FORM



Date Submitted: \_\_\_\_\_

Job # (If Applicable): \_\_\_\_\_

From: \_\_\_\_\_

Selling Facility: \_\_\_\_\_

## PROJECT INFORMATION:

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

Address: \_\_\_\_\_  
\_\_\_\_\_

## INSTALLER INFORMATION:

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

Address: \_\_\_\_\_  
\_\_\_\_\_

## PARTY TO BE INVOICED FOR SERVICES:

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

Address: \_\_\_\_\_  
\_\_\_\_\_

**Roof:** Panel Profile, Material & Thickness, Pan Width, Pan Option, Color, Clip Type, Substrate Components:

**Wall:** Panel Profile, Materials & Thickness, Pan Width, Pan Option, Venting, Color, Attachment, Substrate Components:

**Soffit:** Panel Profile, Materials & Thickness, Pan Width, Pan Option, Venting, Color, Attachment, Substrate Components:

Engineering Required: Roof: YES or NO Wall: YES or NO Soffit: YES or NO

Flashing / Gutter Material to Match Metal Panels: YES or NO Other: \_\_\_\_\_

WTW Type: #1 #2 #3 #4 WTW Term: 5 10 15 20