

PROJECT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

JOB LOCATION: \_\_\_\_\_ SPECIFIER: \_\_\_\_\_

PLEASE USE ADOBE READER OR ADOBE ACROBAT TO FILL OUT AND SAVE FORM. USING OTHER PROGRAMS COULD RESULT IN UNSAVED DATA.

## APPLICATIONS

Please select an option below to describe the end use for your glass. If selecting an F+S System application, please complete the corresponding System's Design Guide.

### F+S SYSTEMS

- LEVELr Wall Panel & Column System
- LEVELe Wall Panel & Column System
- LEVELr Elevator Interiors
- LEVELe Elevator Interiors
- LEVELc-2000 Elevator Interiors

### OTHER APPLICATIONS

- Loose Lite(s)
- Other: \_\_\_\_\_

NOTES \_\_\_\_\_

For all Scribe glass projects, please make selections from each of the following categories:

## GLASS CHARACTERISTICS

Please choose one option from each category.

### CONFIGURATION

- Single-sided
- Double-sided\*

### INTERLAYER

- Ultra White
- Blackboard
- Custom: \_\_\_\_\_

### MAGNETIC

- Non-magnetic
- Magnetic

### FINISH

- Standard
- Pearlex+

\*Double-sided configuration will be built one side selected finish / one side Standard finish (unless otherwise indicated in the project details).

## PROCESSING REQUIREMENTS

Please choose all options that apply and provide detail as needed. If selecting "Yes", please provide drawing details.

### CUTS

- |                  |                              |                             |       |
|------------------|------------------------------|-----------------------------|-------|
| Notches          | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Internal Cutouts | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Pattern Cuts     | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |
| Holes            | <input type="checkbox"/> Yes | <input type="checkbox"/> No | _____ |

### ANSI

- |                     |                                   |                                   |       |
|---------------------|-----------------------------------|-----------------------------------|-------|
| ANSI logo on glass* | <input type="checkbox"/> Yes      | <input type="checkbox"/> No       | _____ |
| ANSI logo type      | <input type="checkbox"/> American | <input type="checkbox"/> Canadian | _____ |
| ANSI logo placement | <input type="checkbox"/> Standard | <input type="checkbox"/> Custom** | _____ |

\*ANSI logo is required for elevator interiors.

\*\*If ANSI logo placement is custom, please provide details.

## MOUNTING OPTIONS

Please choose mounting option, if needed.

### MOUNTING

- Slim Profile Mounting Cleat

For Scribe glass projects used in "Other Applications", please also supply the following information:

LITE DESCRIPTION		
DESCRIPTION (INCLUDE PART NUMBER, IF AVAILABLE)	QUANTITY	SIZE (W x H)
_____	_____	_____
_____	_____	_____
_____	_____	_____

NOTES \_\_\_\_\_  
\_\_\_\_\_

### PROJECT DETAILS

Please choose one option from each category.

<b>INSTALLATION TYPE</b>	<b>GLASS THICKNESS</b>	<b>ENVIRONMENT</b>	<b>LIGHTING CONDITIONS</b>
<input type="checkbox"/> Captured Top & Bottom Only	<input type="checkbox"/> 3/8" (95mm)	<input type="checkbox"/> Interior, Standard Humidity	<input type="checkbox"/> Natural
<input type="checkbox"/> Fully Framed	<input type="checkbox"/> 5/8" (15.9mm)	<input type="checkbox"/> Interior, High Humidity	<input type="checkbox"/> Backlit
<input type="checkbox"/> Mounted to a Solid Substrate			<input type="checkbox"/> Spotlight
<input type="checkbox"/> Curtain Wall/IGU			<input type="checkbox"/> Other (provide details): _____
<input type="checkbox"/> Post Mounted with Holes			_____
<input type="checkbox"/> Curved Profile*			_____

\*If project requires a curved profile, please provide a drawing.

### PROCESSING REQUIREMENTS

Please choose all options that apply and provide detail as needed.

**EDGES**

Seamed Edges	<input type="checkbox"/> All Edges	<input type="checkbox"/> Top	<input type="checkbox"/> Bottom	<input type="checkbox"/> Left Side	<input type="checkbox"/> Right Side
Flat Machine Polished Edges	<input type="checkbox"/> All Edges	<input type="checkbox"/> Top	<input type="checkbox"/> Bottom	<input type="checkbox"/> Left Side	<input type="checkbox"/> Right Side

### GLASS SAFETY STANDARDS

Please choose one option.

**SAFETY STANDARDS**

Annealed

Tempered\*

Heat Strengthened\*\*

\*Tempering is required for load bearing holes and cutouts. Please note that 5/16" laminated glass can only be tempered to a max of 47" x 80".

\*\*Heat strengthening is recommended for glass over 50 square feet.

### ACCESSORIES

Please choose all options that apply and provide detail as needed.

<b>MAGNETS</b>	<b>MARKER TRAY</b>
<input type="checkbox"/> Cylinder (7/16" diameter x 3/8" height) Quantity: _____	<input type="checkbox"/> Marker Tray Length: _____
<input type="checkbox"/> Cube (3/8" x 3/8" x 3/8") Quantity: _____	

Please send completed forms to [sales@forms-surfaces.com](mailto:sales@forms-surfaces.com) or contact us at 800.451.0410 with any questions.