CLADDING FIELD SURVEY

CAB - ONE SPEED CENTER OPENING - LEFT OR RIGHT HAND RETURN

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1600 Main Street
Anderson, IN 46016

JOB NAME: _____

SURVEYOR NAME: _____

SURVEYOR PHONE NUMBER: _____

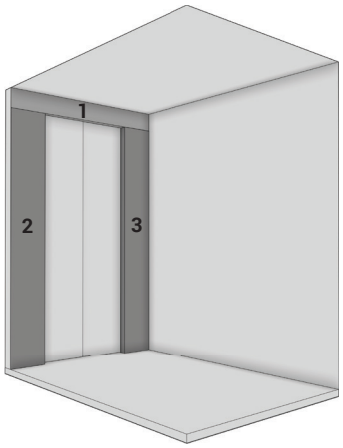
CAPACITY: _____ lbs.

ELEVATOR NUMBER: _____

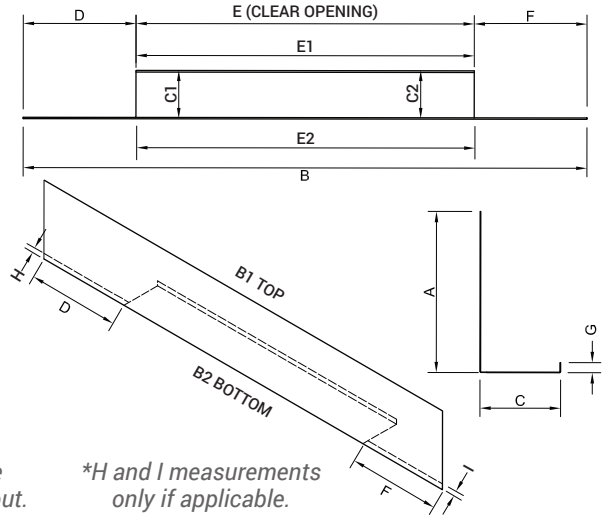
Survey Tips:

1) Send pictures.
2) No "rolling tape" measurements.
   a. Make mark and measure to it.
3) Look for tapers in walls/jambs/strikes/returns.
4) Send C.O.P. dimensions.
5) Measure strike/return heights from threshold or smallest measurement, including cab floor.

1. Transom: *(Complete section entirely and enter all dimensions in inches, not feet)*



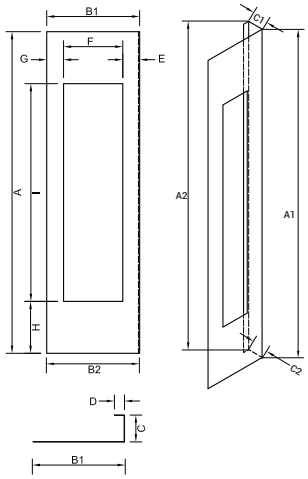
*As an industry standard, surveys are conducted from within the car looking out.



*H and I measurements only if applicable.

Actual Measurements:		For FabACab Internal Use Only:
A: _____"	-1/8"	A: _____"
B1: _____"	-1/8"	B1: _____"
B2: _____"	-1/8"	B2: _____"
C1: _____"	+1/16"	C1: _____"
C2: _____"	+1/16"	C2: _____"
D: _____"		D: _____"
E1: _____"	-1/16"	E1: _____"
E2: _____"	-1/16"	E2: _____"
F: _____"		F: _____"
G: _____"		G: _____"
*H: _____"		*H: _____"
*I: _____"		*I: _____"

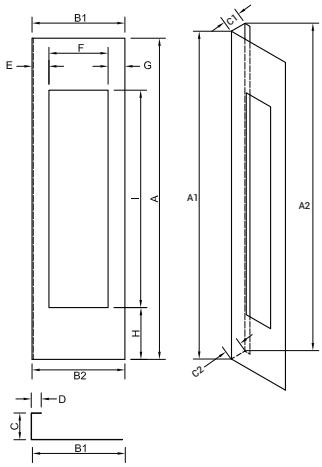
2. Left Return: *(Enter all dimensions in inches, not feet)*



Actual Measurements:		For FabACab Internal Use Only:
A1: _____"	-1/8"	A1: _____"
A2: _____"	-1/8"	A2: _____"
B1: _____"		B1: _____"
B2: _____"		B2: _____"
C1: _____"	+1/16"	C1: _____"
C2: _____"	+1/16"	C2: _____"
D: _____"		D: _____"
*E: _____"		*E: _____"
*F: _____"		*F: _____"
*G: _____"		*G: _____"
*H: _____"		*H: _____"
*I: _____"		*I: _____"

** = OPTIONAL: Return Panel C.O.P. cut out dimensions depending on existing C.O.P. panel location.*

3. Right Return: *(Enter all dimensions in inches, not feet)*



Actual Measurements:		For FabACab Internal Use Only:
A1: _____"	-1/8"	A1: _____"
A2: _____"	-1/8"	A2: _____"
B1: _____"		B1: _____"
B2: _____"		B2: _____"
C1: _____"	+1/16"	C1: _____"
C2: _____"	+1/16"	C2: _____"
D: _____"		D: _____"
*E: _____"		*E: _____"
*F: _____"		*F: _____"
*G: _____"		*G: _____"
*H: _____"		*H: _____"
*I: _____"		*I: _____"

** = OPTIONAL: Return Panel C.O.P. cut out dimensions depending on existing C.O.P. panel location.*

FABRICATION APPROVAL SIGNATURE: _____

(+ or - 1/16" tolerance)

(A signature serves as the final approval of the above dimensions)