

# Koy Concrete, Ltd.

P.O. Box 308 Sealy, TX 77474-0308  
713.319.9390 P 979.885.3551  
Fax 713.319.9393

## Concrete Mix Design Request

Date Required: \_\_\_\_\_

Submit Designs To: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

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

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

Project Location: \_\_\_\_\_

Type of Project (Residential, Commercial, Paving, State or Municipal): \_\_\_\_\_

QC Testing Lab, if any: \_\_\_\_\_ Phone: \_\_\_\_\_

Who's specifications are required? \_\_\_\_\_

### List or Attach Any Required Specifications

	Mix Use	Min Cementitious Content	Required 28 Day Strength	Max Fly Ash % Allowed & Type	Agg Size & Type	W/C Ratio	Slump Range	Air Y/N	Admix
1									
2									
3									
4									
5									
6									

Which flexural strength spec is used, if any?      Center point (C-293)      Third point(C-78)

Is there a product time limit on this project? \_\_\_\_\_

Is there a temperature constraint on this project? \_\_\_\_\_

Concrete Placement Start Date: \_\_\_\_\_ Finish Date: \_\_\_\_\_

What is the approximate number of cubic yards required? \_\_\_\_\_

List all other special requirements of the project or the mix design. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

