



Phone: (954) 480-6919 Fax: (954) 480-6108 Email: Sales@Acstands.com

Site Specific Engineering Form

For Duct Stands and Custom Supports

**** All Fields Must be filled out. Attachments are not accepted as means of answering questions solely ****

Company name: _____ Contact Name _____

Phone #: _____ EXT: _____ Fax: _____

Job name: _____ PO/Invoice # _____

Job address: _____

Roof Height of Building (in feet): _____
(Height in which Supports will be installed on Roof/ Deck)

Roof Type material: _____
(For Example: Concrete, Steel Wood, Post Tension, Etc.)

Joist spacing (if needed): _____ Maximum embedment: _____

Risk Category of Building: _____ Required Wind Speed: _____

Duct/ Pipe Information

(If Multiple Please list all sizes)

Length: _____ Width: _____ Height: _____ Weight: _____

Mounting Holes of unit on Center: _____ Desired Anchor into stand: _____

Stand Information

Desired stand height: _____ Number of Supports Needed Per Run : _____

Unit spacing on stand: _____ Desired Anchor into roof: _____