

CANTILEVER QUOTATION REQUEST FORM

DATE: _____ DEALER: _____ CONTACT: _____

TEL. NO.: _____ FAX NO.: _____ E-MAIL: _____

CUSTOMER: _____ CONTACT: _____

PRODUCT DESCRIPTION:

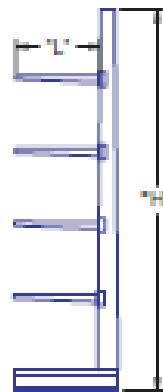
PRODUCT TO BE STORED: _____? WEIGHT PER LIFT: _____? LIFTS PER LEVEL: _____?

PRODUCT LENGTH: _____? PRODUCT DEPTH: _____? PRODUCT HEIGHT: _____?



SINGLE-SIDED SYSTEM:

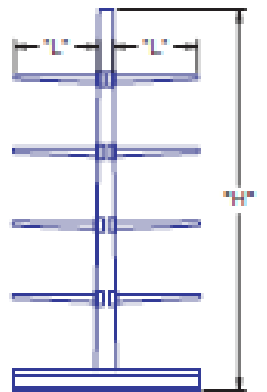
NO. OF ARMS PER COLUMN: _____?



COLUMN HEIGHT: _____?

DOUBLE-SIDED SYSTEM:

NO. OF ARMS PER COLUMN PER SIDE: _____?



COLUMN HEIGHT: _____?

ARM LENGTH: _____?

COLUMNS PER SECTION:

COLUMN CENTERS: _____?

"A"

2 COL./SEC.

"B"

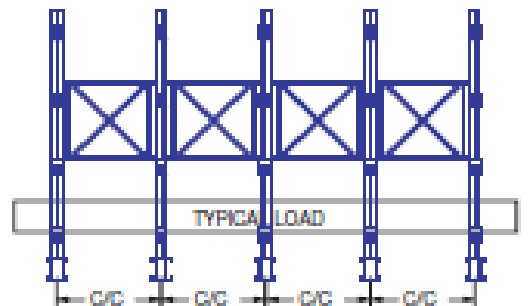
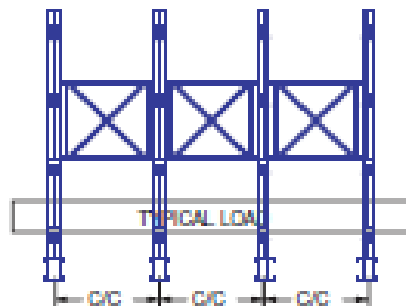
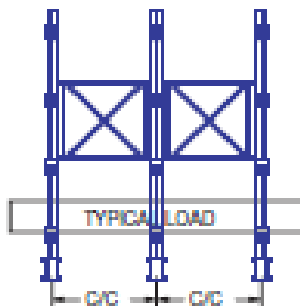
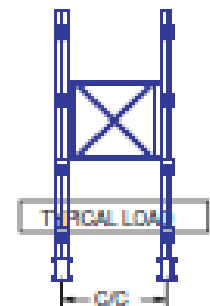
3 COL./SEC.

"C"

4 COL./SEC.

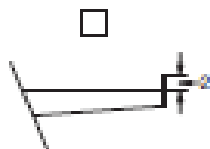
"D"

5 COL./SEC.

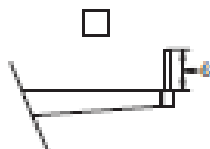


ACCESSORIES:

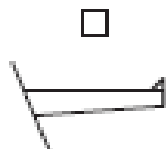
ARM END STOPS



FLAT PLATE

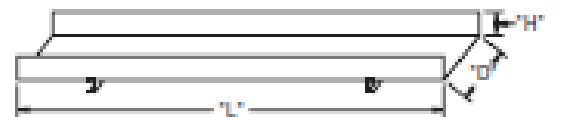


PIPE & SOCKET



WEDGE STOPS

TRAYS



LENGTH: _____? CW: _____? LEGS
 DEPTH: _____? CW: _____? DIVIDERS
 HEIGHT: _____? DIVIDER HEIGHT: _____?

ADDITIONAL INFORMATION:

APPLICATION: INDOOR OUTDOOR FOUNDATION: CONCRETE GRAVEL ASPHALT OTHER _____

DESIGN CRITERIA: NON SEISMIC SEISMIC SITE LOCATION: _____

Notes: