



# Site Survey – Quote Request

## 1. Client Information

Company Name: \_\_\_\_\_  
 Company Address: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

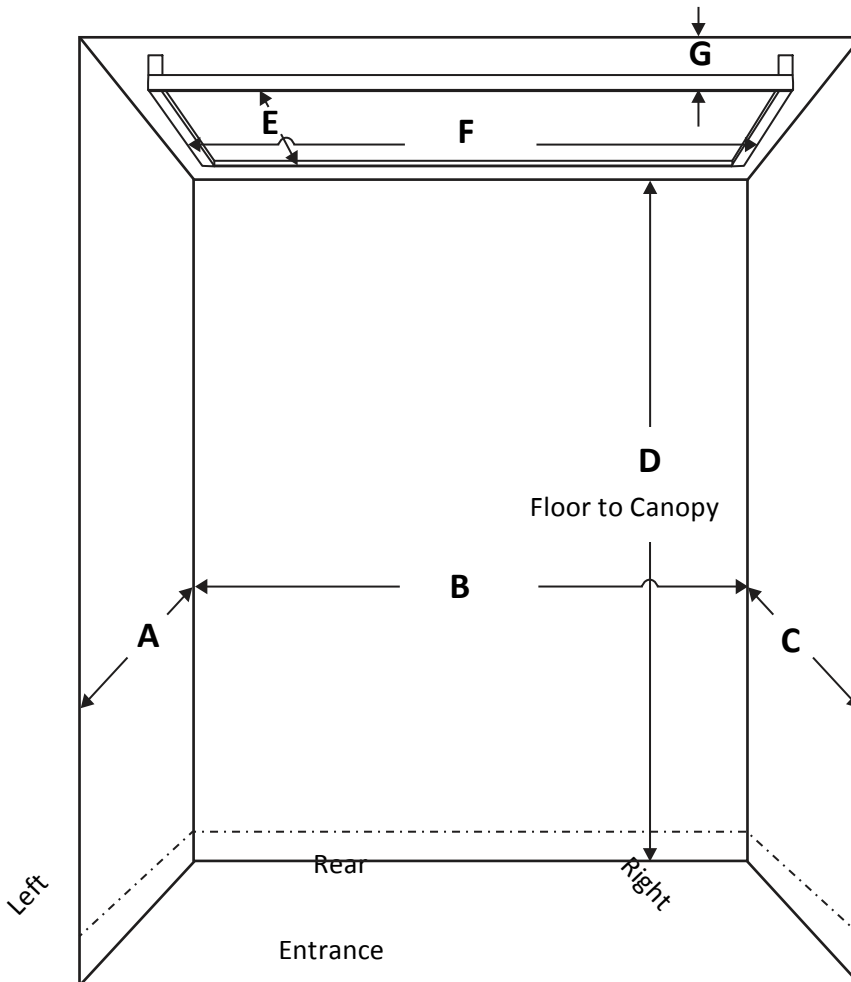
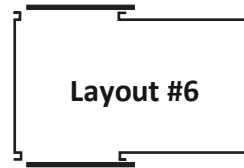
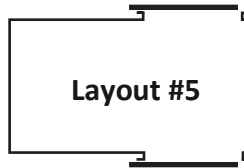
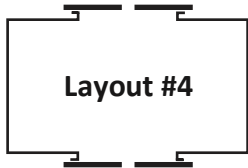
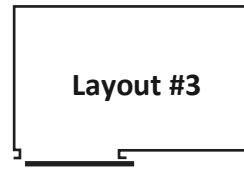
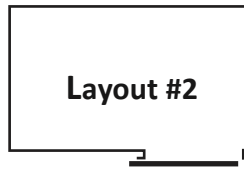
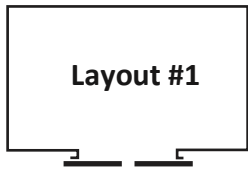
## 2. Site Information

Site Address: \_\_\_\_\_  
 Project Number: \_\_\_\_\_ Quote Version: \_\_\_\_\_  
 Cab Number: \_\_\_\_\_ Panel Orientation: \_\_\_ Vertical \_\_\_ Horizontal

Capacity	Handrails	Wall Panels	Canopy / Ceilings
___ 2,000 lbs.	___ Rear Wall	___ Stainless Steel ___ Walls	___ Eclipse
___ 2,500 lbs.	___ Side Wall	___ Other Metals ___ Walls	___ Provident
___ 3,000 lbs.	___ 1.5" Round	___ Laminate ___ Walls	___ Transcend
___ 3,500 lbs.	___ 2" Flat	___ Glass, Etching ___ Walls	Other:
___ 4,500 lbs.	___ 2" Round	___ Mirrors ___ Walls	
___ 5,000 lbs.	___ 3" Flat	Other:	
Other:	___ 4" Flat	Reference Model:	
Custom / Variation:	___ 6" Flat ___ Bumpers ___ Size	Custom / Variation:	
	Other:		Hatch/Exhaust Fan Location:
	Custom / Variation:		Custom / Variation:

### 3. Cab Construction, Layout and Dimensions

Please indicate which drawing matches your cab layout.



	Dimension
A	
B	
C	
D	
E	
F	
G	

**Note:**

- Required dimensions are shell to shell (i.e.: with panels removed)
- Dimensions E, F and G required only if suspended ceiling is to remain.
- Dimension D is floor to Canopy

### 4. Comments

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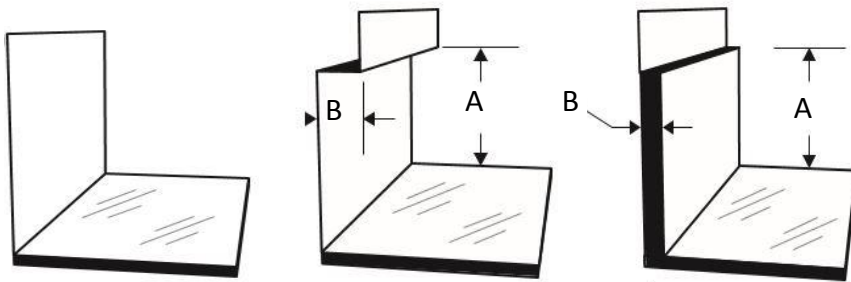
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### 5. Kick Plate Profile

Please circle the kick plate that matches the one in your cab, with the panels removed, and fill in the dimensions.

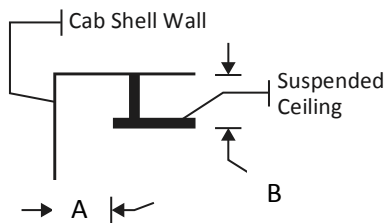


Dimensions	
A	
B	

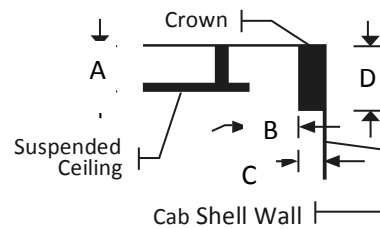
### 6. Ceiling Profile

Please circle the ceiling profile that best matches the one in your cab and fill in the dimensions.

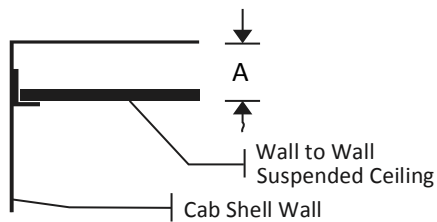
**Suspended Ceiling**



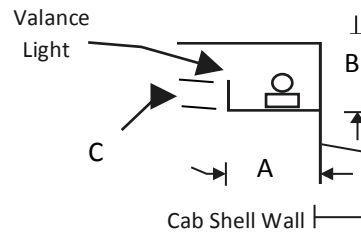
**Perimeter Crown & Suspended Ceiling**



**Wall to Wall Suspended Ceiling**



**Light Valance (no false ceiling)**



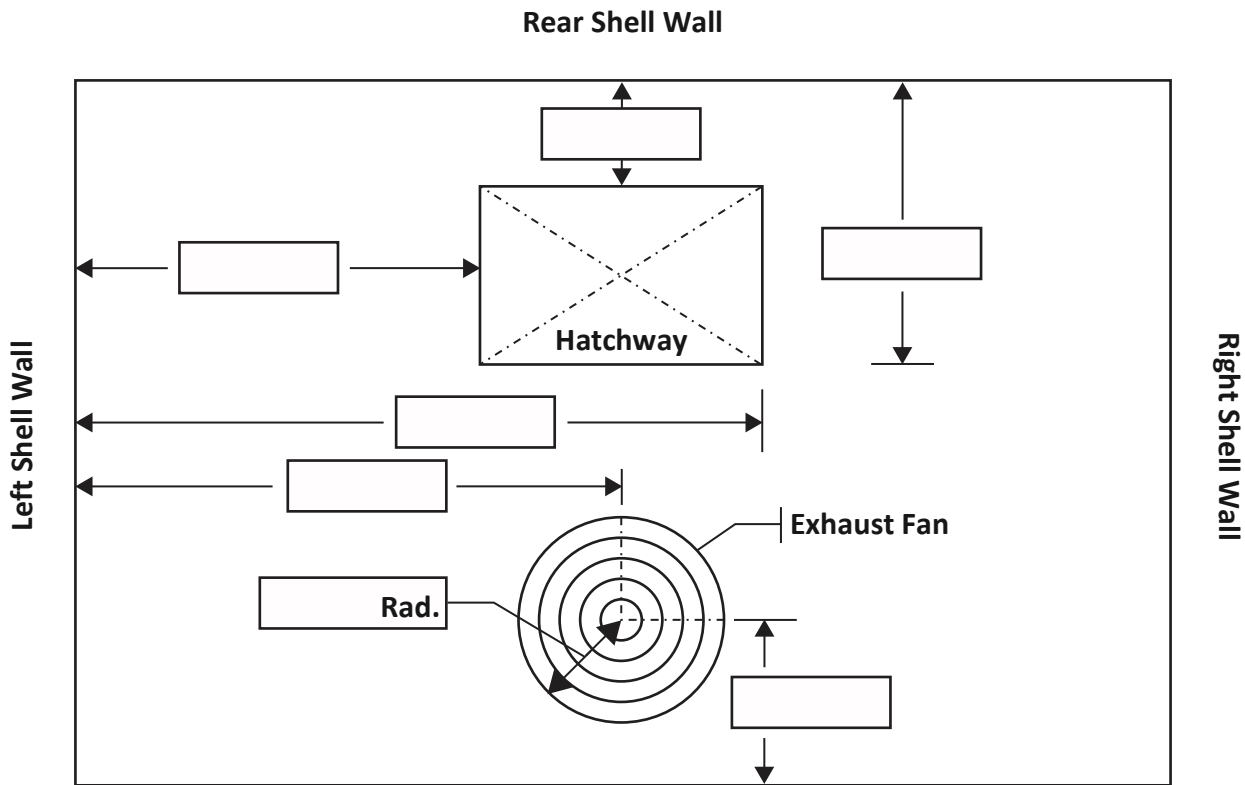
Dimensions (please fill in the applicable dimensions for the above indicated ceiling type)

	Entrance Wall	Left Side Wall	Right Side Wall	Rear Wall
A				
B				
C				
D				

7.

**Cab Canopy**

Please record the dimensions in the boxes on the ceiling plan. Fill this section in only if a new false ceiling is required.



8. Pictures: For best results, please include photos of:

- Rear Corners
  - Left Hand Side Top .....
  - Right Hand Side Top ....
  - Left Hand Side Bottom .....
  - Right Hand Side Bottom .....
- Front Corners
  - Left Hand Side Top .....
  - Right Hand Side Top ....
  - Left Hand Side Bottom .....
  - Right Hand Side Bottom .....
- Floor at Sill .....
- Ceiling at Hatch .....
- Any Other Details that you think will add clarity .....