



PRO-FAB SHEET METAL

Illinois Plant

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Indiana Plant

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Phone (219) 791-1212 Fax (219) 791-1313

www.profabsm.com

Date _____

RECTANGULAR FITTINGS FORM

Page _____ Of _____

Customer Name _____

Job Name _____ PO _____

Address _____

Address _____

Phone _____

Contact Name _____ Ph.# _____

Date Required _____

Cover Ends With Plastic Pickup Delivery

1 Std. Radius Throat- Unless Noted 	2 X=DEG 	3 X=DEG 	4 	5 	6
7 	8 	9 	10 	11 	12
13 	14 	15 	16 	18 VOLUME DAMPER	NOTES <input type="checkbox"/> S & D <input type="checkbox"/> TDC PRESSURE: _____ w.g. MATERIAL: _____
17 	19 				

STYLE	QTY.	END 1		END 2		END 3		L	OFF	TU	TD	X=DEG.	TH1	TH2	TH3	TH4	LINER	REMARKS
		A	B	C	D	E	F											