

Company:

Project Name & Description

Date:

Contact:

E-mail:

Phone:

Fax:

Ship to Zip:

Competition:

Award Date:

Datum Rep:

State Contract? Y N

GSA Contract? Y N

Other Contract? Y N
(If yes, please specify)

Storage Criteria

What are you storing?

Existing capacity in linear filing inches:
 Maximize capacity of area? Y N
 Drawing exactly as submitted? Y N
 Minimum linear filing inches:
 Number of shelf openings:
 Ceiling height:
 Required clearance:
 Sprinklers? Y N
 File tab: Side Top Hanging

Depth	Height	Width
Book 9"	_____	_____
Letter 12"	9-1/2"	_____
Legal 15"	11"	_____
X-Ray 18"	15"	_____
Archive 16"	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

MobileTrak® System	Shelving
System wheel size 3" Low Profile Up to 20' 5" Up to 50' System track type Customer-supplied Grout Locks Anti-tip	4Post™ Shelving _____ Upright Height _____ # of Openings _____ Inside Clearance _____ # of Dividers/Shelves _____ Posting Shelf _____ Center/Back Stops _____ Steel Back panels Drawers & Options Pull-out file Hanging File Locking Non-Locking Front-to-Back Side-to-Side Shelving Type Standard Duty 22ga Heavy Duty 18ga Heavy Duty Plus 18ga Library D-span (Wide Span) If D-span (Wide Span) Shelving is indicated, please provide the following information: No. of openings _____ Clear opening height _____ Clear opening width _____ Maximum height _____ Wt. load required per shelf _____ Seismic Y N D-span shelf type
End Panel System entry Single Dual System type Decking Ramp Options Mechanical Safety Sweep None Synchro Drive Other / Custom (see below) Carriage Lips	

Datum Installation

Quote Datum Install	After hours	Loading dock
	Prevailing wage	Elevator
	Union	Stairs