Send to: _____

Central States Dealer Information:

Account Number:_____

Dealer _____

City, State _____

Dealer Contact_____

Phone (_____)-_____-_____   FAX (_____)-_____-_____

Email_____

Job Information: Date: ____/_____/____

Job Name_____

Address _____

City, State _____Zip_____   Inside City Limits?

Delivery Contact_____

Delivery Contact Phone (_____)-_____-_____

CSMI Sales Representative:

Please verify colors and delivery information before production

Out-to-Out of Steel		Sidewall Eave Height		Bay Spacing	Roof Slope	Future Expansion?	
Width	Length	FSW	BSW	Sidewall/Frame	___:12	LEW	Yes__ No__
				____@____ ft		REW	Yes__ No__

Roof:			Overhang	Soffit	Gutter	Yes__ No__		Wind Framing (Cables standard)		
	Color	Galv	LEW	☐	Rat Guard__ **OR** Base Trim__			Cables	FSW___ BSW___	
Roof		☐	REW	☐	Concrete Slab	Yes__ No__		Wind Column	FSW___ BSW___	
Wall		☐	FSW	☐	Walls on Piers	Yes__ No__		Portal Frame	FSW___ BSW___	
Trim		☐	BSW	☐						

Sheeting/Girts Removed?			Wainscot	Liner Panel
LEW	Yes___	No___	Height _____	Wall Height _____
REW	Yes___	No___		Roof Liner
FSW	Yes___	No___		
BSW	Yes___	No___		

Loads: Building Occupancy Category
_____ I - Low, Agri Storage, no office or people
_____ II - Normal, Standard Building
_____ III - High, Schools, Large Occupancy
_____ IV - Post   Essential (fire Dept. Hospital)
Codes:
Building Code_____
Ground snow _____psf
Roof live load reduction Yes____   No____
Wind _____MPH Collateral Load_____psf
Wind Exposure: (B)_____ (C)_____
Insulation Yes___ No___ **OR** SPRAYFOAM____
Thickness Roof____" Wall____"
Heated   Yes____ No____

CSM WALK DOORS:
___ : 3070   ___: 4070   ___ : 6070

NO FRAMED OPENING REQUIRED FOR CSM DOORS.
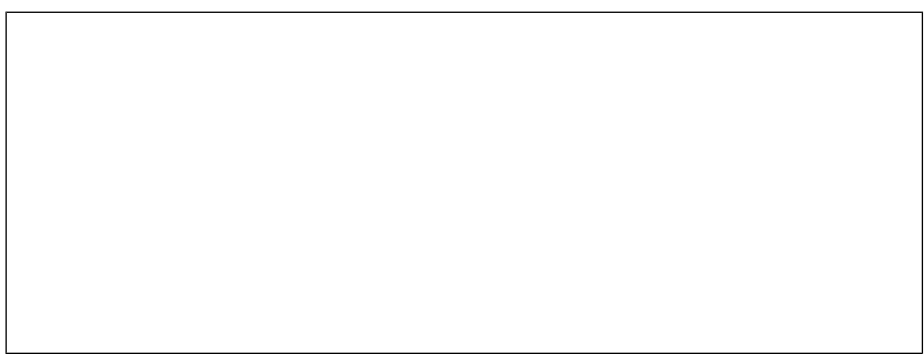PLEASE NOTE ANY SPECIAL HARDWARE BELOW.
DRAW APPROXIMATE LOCATION ON SKETCH.

Framed Openings

Left End Wall	Right End Wall
____-_____X_____	____-_____X_____
____-_____X_____	____-_____X_____
____-_____X_____	____-_____X_____

Front Side Wall	Back Side Wall
____-_____X_____	____-_____X_____
____-_____X_____	____-_____X_____
____-_____X_____	____-_____X_____

Notes:_____
_____

BSW (Back Side Wall) [Low side on Single Slope]

PLEASE DRAW INTERIOR COLUMNS OR ANY OTHER RELEVANT FEATURES ON SKETCH

LEW (Left End Wall)

REW (Right End Wall)

FSW (Front Side Wall) [High side on Single Slope]

We may use the most economical construction methods for any field left blank.

BSW   REW

FSW

LEW

LEW

REW

FSW

BSW

REW

BSW

FSW

LEW

LEW

REW

FSW

BSW