

# ARCHITECTURAL PRODUCTS COMPANY

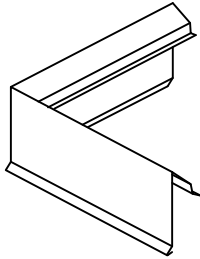
1290 AVIATION BLVD. SUITE 200  
 P.O. BOX 630  
 HEBRON, KY 41048

**KY (859) 689-2210 OUT STATE (800) 837-1001**  
**FAX (859) 689-2215**

SP - FASCIA

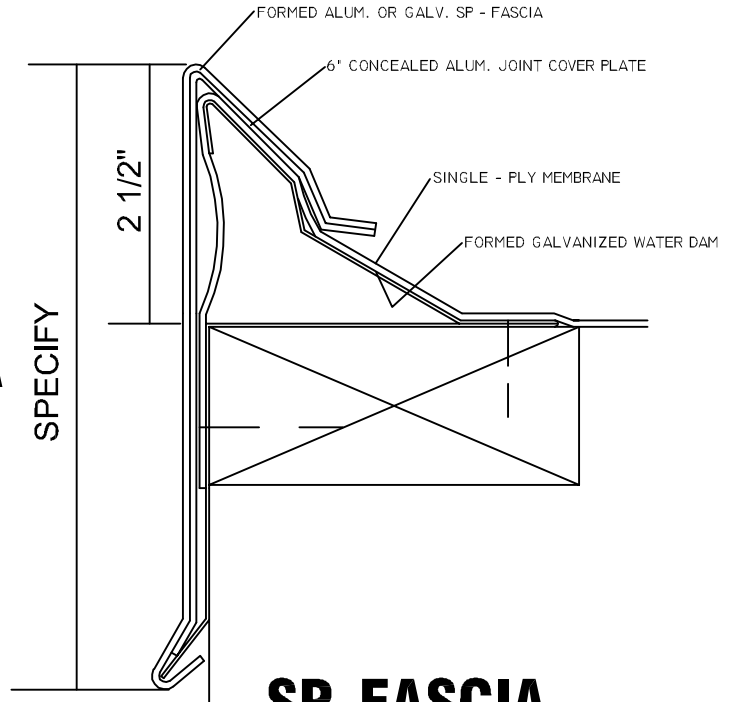
**QUANTITY**

- \_\_\_ FT. TOTAL PERIMETER
- \_\_\_ PCS STOCK @ 10'0"
- \_\_\_ PCS STD. O.S. CORNER
- \_\_\_ PCS STD. I.S. CORNER
- \_\_\_ PCS SPEC. CORNER  
(ATTACH SKETCHES)
- \_\_\_ PCS END CAP - L
- \_\_\_ PCS ENDCAP - R
- \_\_\_ PCS END TERM - L
- \_\_\_ PCS END TERM - R



**WELDED CORNERS**

**A**  
 SPECIFY



## SP-FASCIA

DETAIL	ARCH'L REF.	DESCRIPTION	
SIZE	FACE DIM.	GAUGE	MATERIAL
<input type="checkbox"/> SP425	4-1/4"	<input type="checkbox"/> .050" (1.27MM)	<input type="checkbox"/> ALUMINUM
<input type="checkbox"/> SP525	5-1/4"	<input type="checkbox"/> .063" (1.60MM)	<input type="checkbox"/> GALV STEEL
<input type="checkbox"/> SP600	6"	<input type="checkbox"/> .080" (2.03MM)	<input type="checkbox"/> STAINLESS STEEL
<input type="checkbox"/> SP700	7"	<input type="checkbox"/> 24 GA.	<input type="checkbox"/> _____
<input type="checkbox"/> SP800	8"	<input type="checkbox"/> 22 GA.	
<input type="checkbox"/> SP1000	10"	<input type="checkbox"/> _____	
<input type="checkbox"/> OTHER _____			COLOR _____
<b>TRANSMITTAL</b> <input type="checkbox"/> REQUEST FOR QUOTATION <input type="checkbox"/> REQUEST FOR INFORMATION <input type="checkbox"/> SUBMIT AS QUOTATION <input type="checkbox"/> CONFIRMING TELCON <input type="checkbox"/> SUBMIT FOR APPROVAL <input type="checkbox"/> FOR YOUR FILES BY _____ DATE _____		<b>CUSTOMER APPROVAL</b> <input type="checkbox"/> APPROVED FOR FABRICATION <input type="checkbox"/> APPROVED WITH CHANGES    AUTHORIZED CUSTOMER SIGNATURE _____ <input type="checkbox"/> DISAPPROVED, RESUBMIT TITLE _____ DATE _____	
JOB NAME		JOB #	
LOCATION		SHEET OF	
CUSTOMER		BY	
REPRESENTATIVE		DATE	
ARCHITECT			