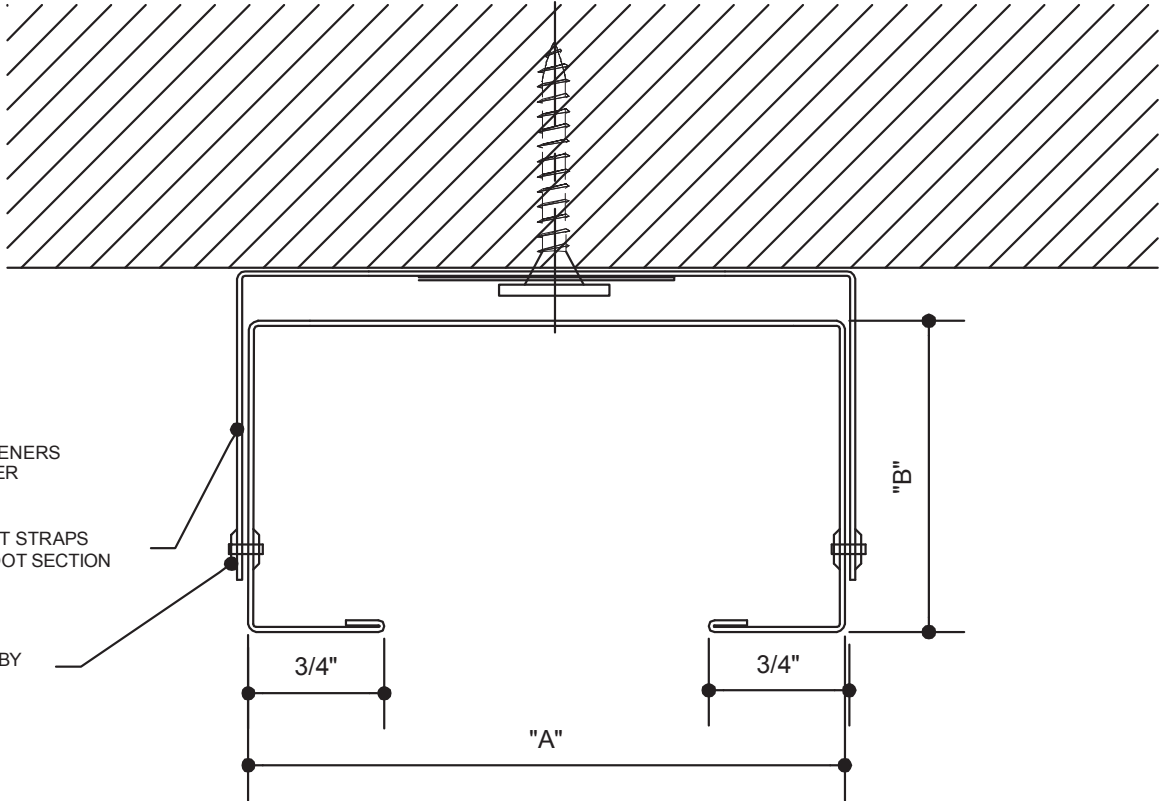




Open Face Downspout

Order Specification Form

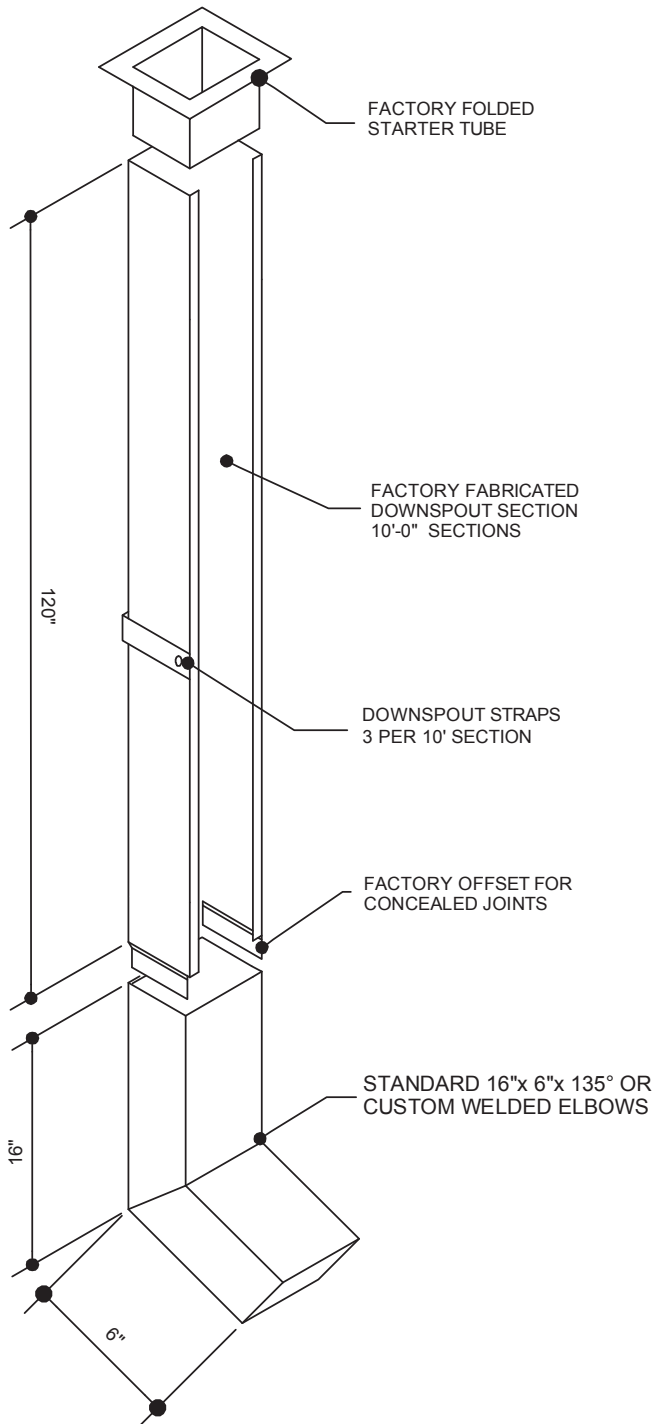


| QUANTITY | SIZE | CAP MATERIAL | THICKNESS | CAP FINISH |
|--|----------|-------------------------------------|--------------------------------|--|
| ___ PCS Stock @ 10' 0" | A= _____ | <input type="checkbox"/> Aluminum | <input type="checkbox"/> 0.032 | <input type="checkbox"/> Mill Finish |
| ___ PCS Starter Tubes | B= _____ | <input type="checkbox"/> Galvanized | <input type="checkbox"/> 0.040 | <input type="checkbox"/> Kynar 500 |
| ___ PCS STD. Elbows (Attach Sketches) | | <input type="checkbox"/> _____ | <input type="checkbox"/> 0.050 | <input type="checkbox"/> Clear Anodized |
| ___ Soffit Elbows Style 1 Angle @ _____ | | | <input type="checkbox"/> 0.063 | <input type="checkbox"/> Bronze Anodized |
| ___ Soffit Elbows Style 2 Angle @ _____ | | | <input type="checkbox"/> 22GA | <input type="checkbox"/> Black Anodized |
| | | | <input type="checkbox"/> 24GA | <input type="checkbox"/> _____ |
| | | | <input type="checkbox"/> _____ | |
| COLOR _____ | | | | |

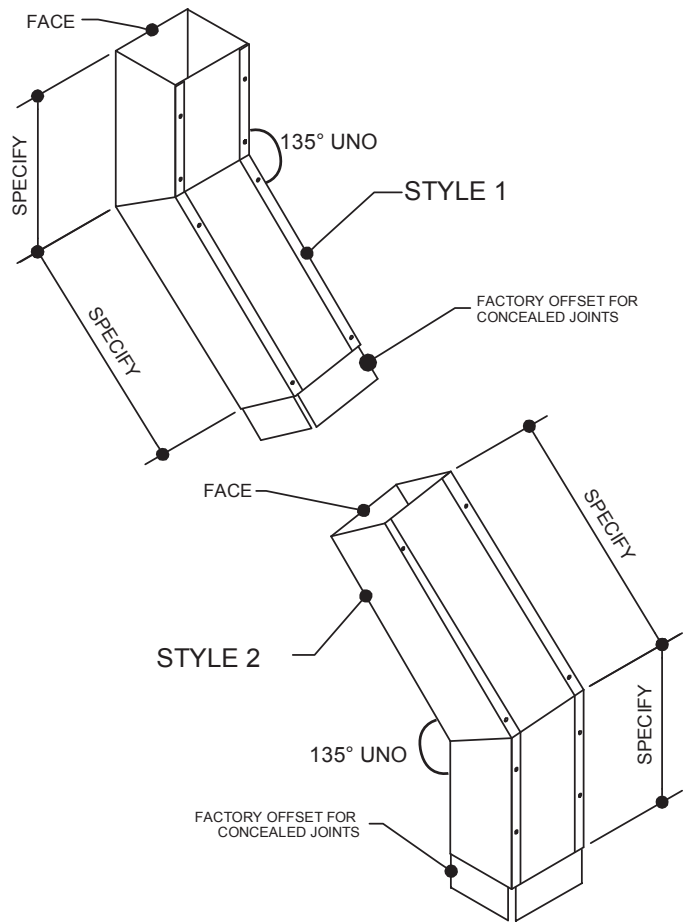
| | | | |
|--|-------------------|---|-------------------------------------|
| APPROVALS: Contact manufacturer for verification of test report data on your project. | | CUSTOMER APPROVAL | |
| | | <input type="checkbox"/> Approved for Fabrication | Authorized Customer Signature _____ |
| | | <input type="checkbox"/> Approved with Changes | _____ |
| | | <input type="checkbox"/> Not Approved | Title _____ Date _____ |
| Job Name: | Job #: | By: | |
| Customer: | Project Location: | Date: | |
| Representative: | Architect: | Sheet of _____ | |



Open Face Downspout



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