



CUBIC MEZZANINE QUOTE REQUEST FORM

Complete this **Quote Request Form** to receive pricing for a Cubic Mezzanine. If you have multiple applications, please complete additional forms. Once you have completed this form fax it to 262-789-1970.

Name _____

Phone _____

Title _____

Fax _____

Company _____

Email _____

Address _____

City, State, Zip _____

OVERALL SIZE

_____ width x _____ length x _____ # of levels

MEZZANINE HEIGHT (SELECT ONE)

Clear Height _____ feet Do you have a clear height restriction? _____ If Yes, please describe:

Top of Deck Height _____ feet

COLUMN SPACING

Most Economical Largest Practical Custom: _____ inches apart

DECK SURFACE

Roof Deck with Resindex LD - Unpainted

Roof Deck with Resindex LD - Gray

Roof Deck with Plywood

Roof Deck with Polytexture .05

Roof Deck with Polytexture .10

Roof Deck for Concrete

Bar Grating

Diamond Plate

Other:

STAIR SYSTEMS

Quantity: _____ Closed Risers: Yes No

IBC 40"

UBC 40"

CAUBC 40"

OSHA 37"

BOCA

Other Width:

PLATFORMS

Quantity: _____ 48" x 48" Quantity: _____ 45" x 45"
Quantity: _____ 48" x 96" Quantity: _____ 45" x 80"

RAILING

_____ feet
 Two Level
 Three Level
 Seven Level

KICKPLATE

_____ feet

GATES

_____ feet
 Swing Gate 6 Ft.
 Swing Gate 8 Ft.
 Sliding Gate 6 Ft.
 Sliding Gate 8 Ft.
 Sliding Gate 10 Ft.

SEISMIC ZONES 3 & 4 (REQUIRED DATA)

Slab Thickness: _____ inches
Strength: _____ pounds per square inch
Soil Capacity: _____ pounds per square foot

WOULD YOU LIKE ANY OF THE FOLLOWING INCLUDED WITH YOUR QUOTE?

Column Layout
 Installation Price
 Specifications
 Email Quote To: _____ Fax Quote To: _____

DESCRIBE ANY ADDITIONAL SPECIFICATIONS