*Company:		*Job Name:		
Address:		*Location:		*Location State:
		*Elevator #:		Building:
*Contact Person	:			
Phone:		*Email:		
			WHA	Γ IS REQUIRED:
	O.W. —	-	□ I	New Sill

		WHAT IS REQUIRED:
O.W E	PROFILE A	New Sill Mod / Overlay
SHAFT SIDE G		TYPE SILL REQUIRED: Entrance Sill Cab Sill
SHAFT SIDE G	PROFILE B	PROFILE REQUIRED: Profile A Profile B
-BD-		EXISTING SILL Clear opening size
CAR #:		Finish:
FLOOR #:		Aluminum Bronze
A=		Nickel silver Cast iron
B=		
C=		NEW SILL
D=		Finish:
E=		Stainless steel Bronze
G=		Other
O.W.= overall width		
SILL LENGTH:		