

# DERBIGUM

*Roofing Solutions*

# PERLOK

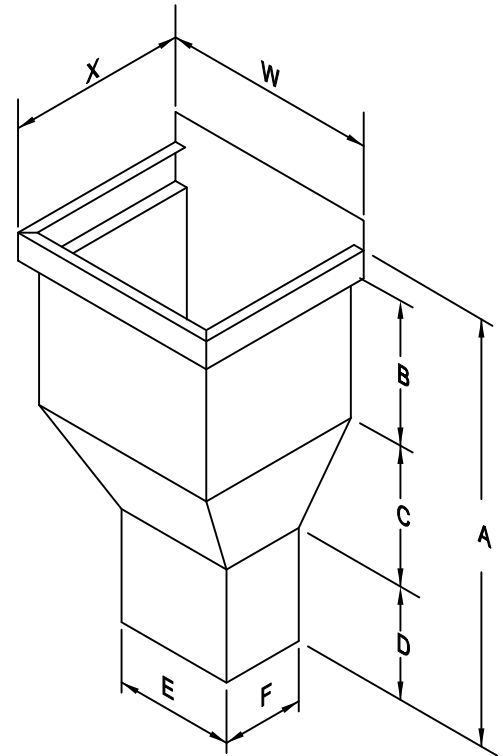
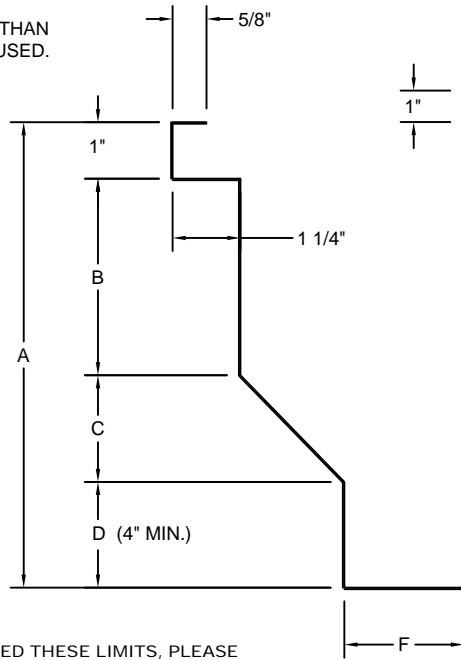
Conductor Head  
Order /Specification Form

4800 Blue Parkway Kansas City, MO 6413C  
800.727.9872 Fax: 816.921.5007  
www.derbigum.com

NOTE:  
"E" & "F" ARE SIZED 1/4" LESS THAN  
SIZE OF DOWNSPOUT TO BE USED.

DIM. "A" = 24" MAXIMUM  
DIM. "X" = 12" MAXIMUM  
DIM. "W" = 18" MAXIMUM

A = \_\_\_\_\_  
B = \_\_\_\_\_  
C = \_\_\_\_\_  
D = \_\_\_\_\_  
E = \_\_\_\_\_  
F = \_\_\_\_\_  
X = \_\_\_\_\_  
Y = \_\_\_\_\_



IF YOUR SPECIFICATIONS EXCEED THESE LIMITS, PLEASE  
CONTACT PRS FOR SIZES BEYOND THESE LIMITS.

SECTION CUT

DETAIL:	ARCHITECTURAL REF:	DESCRIPTION:	
QUANTITY, THIS DETAIL _____ PIECES EACH		MATERIAL	TYPE
		<input type="checkbox"/> ALUMINUM <input type="checkbox"/> STAINLESS STEEL <input type="checkbox"/> _____	<input type="checkbox"/> WELDED
		THICKNESS	FINISH
		<input type="checkbox"/> .050 <input type="checkbox"/> .063 <input type="checkbox"/> _____	<input type="checkbox"/> MILL FINISH <input type="checkbox"/> POST FINISHED KYNAR <input type="checkbox"/> POST FINISHED ANODIZE <input type="checkbox"/> _____
		COLOR _____	
Transmittal <input type="checkbox"/> REQUEST FOR QUOTATION <input type="checkbox"/> SUBMIT FOR APPROVAL <input type="checkbox"/> REQUEST FOR INFORMATION <input type="checkbox"/> CONFIRMING TELECONFERENCE <input type="checkbox"/> FOR YOUR FILES By _____ Date _____		Customer Approval <input type="checkbox"/> APPROVED FOR FABRICATION <input type="checkbox"/> APPROVED AS NOTED <input type="checkbox"/> AMEND & RESUBMIT _____ Authorized Customer Signature _____ Title _____ Date _____	
Job Name			Job #
Location			Sheet of
Customer			By
Representative			Date
Architect			G:\A13\ORDERSPEC\CONDUCTOR HEAD\CONDUCTOR HEAD