

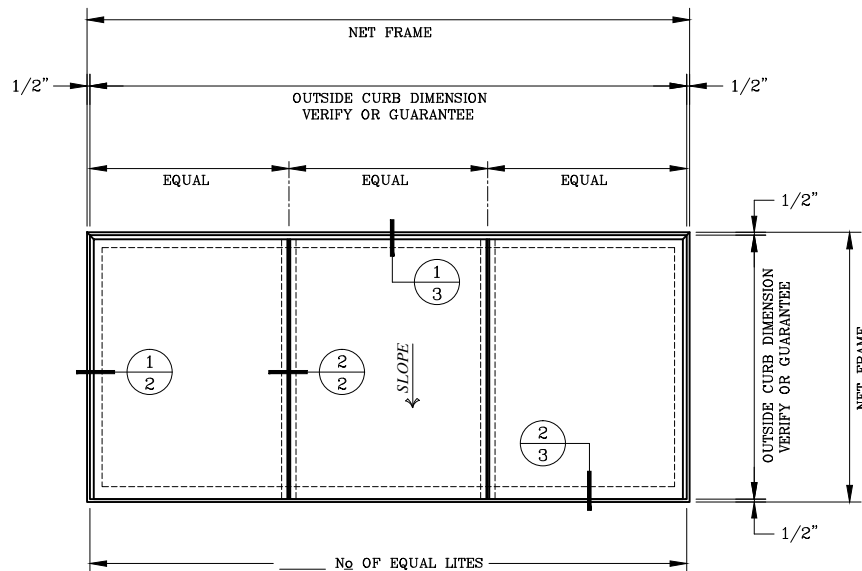
* CONTRACTOR TO VERIFY OR GUARANTEE
DIMENSIONS AND SLOPE.

CHECK BOX BEFORE RETURNING.

- VERIFIED ☐ - GUARANTEED ☐

SIGNATURE _____

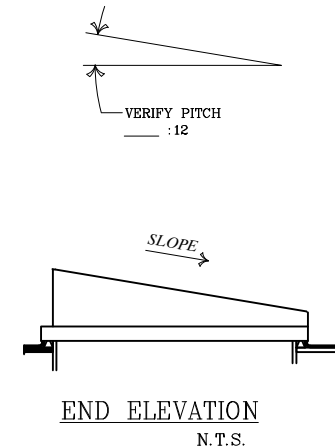
DATE _____



SKYLIGHT PLAN VIEW

N.T.S.

QUANTITY



File: project/skylight/cath.



O'KEEFFE'S, INC.

325 NEWHALL STREET TEL: (415) 824-4900
SAN FRANCISCO, CA 94124 FAX: (415) 824 5900

FINISH:

GLAZING: 1/4" SUPERLITE-I-XL 60 OVER
5/16" H.S. CLEAR LAMINATED

☐ FIELD GLAZED
☐ SHOP GLAZED

MEASURED AND
INSTALLED BY:

PROJECT:

CUSTOMER:

ADDRESS:

CONTACT:

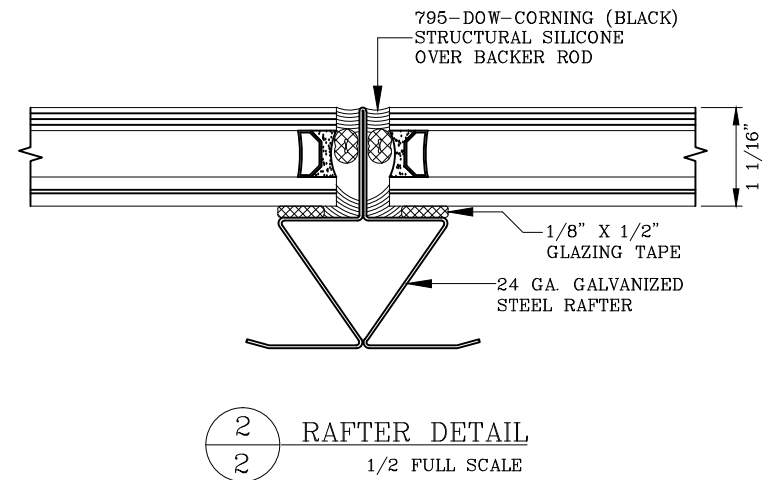
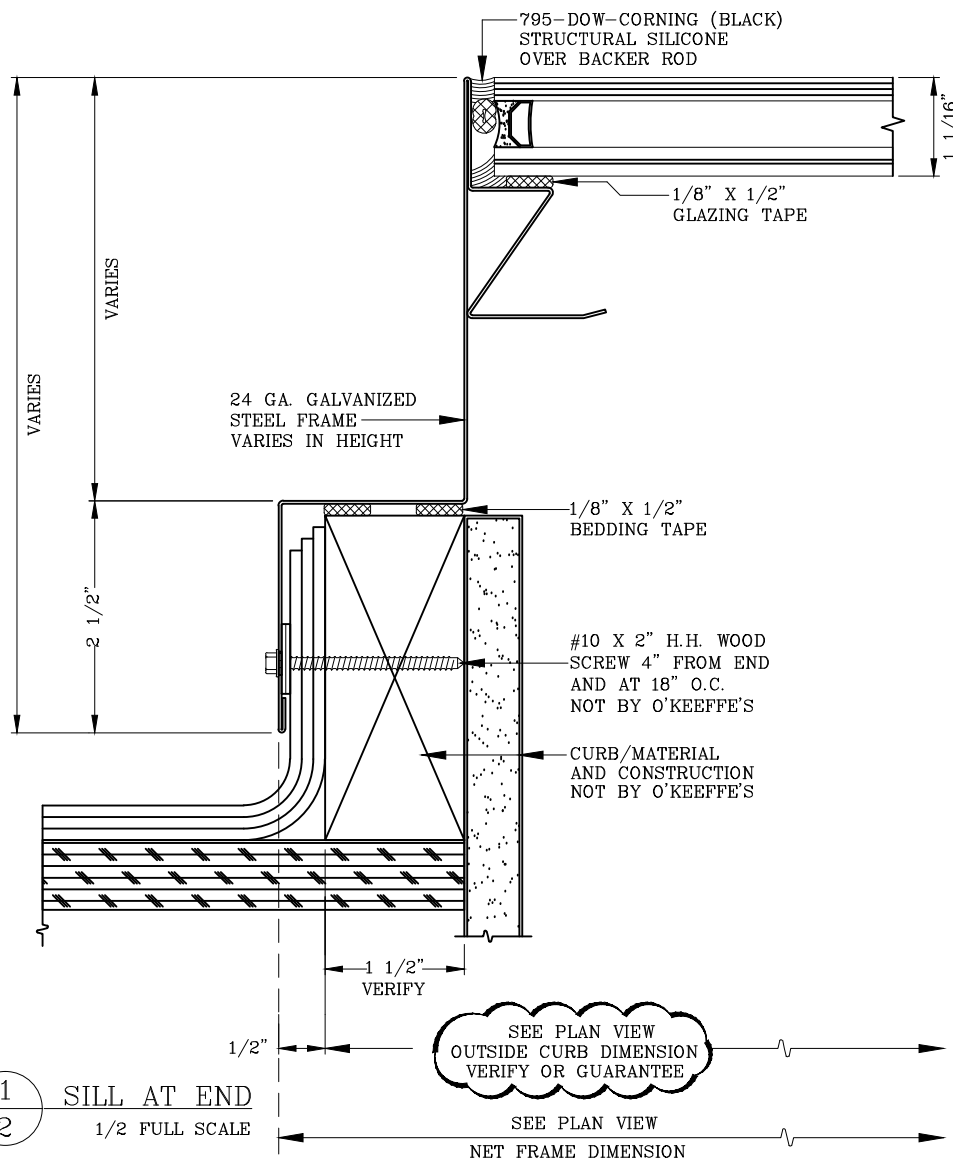
(TEL.)

SALE NO.

DRAWN :

DATE :

SHEET : 1 OF 3



File: project/skylight/cath.



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☐ FIELD GLAZED
☐ SHOP GLAZED

MEASURED AND
INSTALLED BY:

PROJECT:

CUSTOMER:

ADDRESS:

CONTACT:

(TEL.)

SALE NO.

DRAWN :

DATE :

SHEET : 2 OF 3

