

# ROUND Fittings

**CASCO**  
 (818) 365-9561 • Fax (818) 365-4923

Customer : _____ Job Name : _____ Ship To : _____ Date: _____	<input type="checkbox"/> Order P.O. #: _____ Date Required: _____ Submitted By: _____	<input type="checkbox"/> BID ONLY Bid Date: _____ Bid Time: _____
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Dwg: \_\_\_\_\_ Area: \_\_\_\_\_ System: \_\_\_\_\_

<b>SPECS:</b> <input type="checkbox"/> SMACNA <input type="checkbox"/> LAC <input type="checkbox"/> UMC <input type="checkbox"/> Other: _____	<b>MATERIAL:</b> <input type="checkbox"/> Galvanized <input type="checkbox"/> SS304 <input type="checkbox"/> Aluminum <input type="checkbox"/> SS316 <input type="checkbox"/> PVC Coated <input type="checkbox"/> Other: _____ <input type="checkbox"/> Painted (Bonderized)	<b>DUCT LINER:</b> <input type="checkbox"/> NONE <input type="checkbox"/> 1 1/2" <input type="checkbox"/> 1/2" <input type="checkbox"/> 2" <input type="checkbox"/> 1" <input type="checkbox"/> Other: _____	<b>SEAM TYPE:</b> <input type="checkbox"/> Spot Weld <input type="checkbox"/> Seam Weld <input type="checkbox"/> Welded	<b>EXPOSED:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
<b>STATIC PRESSURE (+,-):</b> <input type="checkbox"/> 0-2" W.G. <input type="checkbox"/> To 10" W.G. (Med & High) <input type="checkbox"/> Spec: _____	<b>CONSTRUCTION:</b> <input type="checkbox"/> Low Pressure (Crimp & Bead Only) <input type="checkbox"/> Medium & High Pressure (with 3" Couplings & Bead)	<b>CIRCLINER:</b> <input type="checkbox"/> PLAIN (Uncoated) <input type="checkbox"/> Coated	<b>SEALED:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	<b>Special Instruction:</b>

Type	Qty	TAG	GA <small>(GAUGE)</small>	AØ	BØ	CØ	DØ	Length	Deg°	Throat	Gores	Offset	Dampers	Saddle	Conn	Remarks
1.																
2.																
3.																
4.																
5.																
6.																
7.																
8.																
9.																
10.																
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16.																
17.																
18.																