



**CARUSO
TURLEY
SCOTT**
consulting
structural
engineers

QUICKFRAMES Site Specific Info

Note: Please fill out one sheet for each type of frame used supporting each type of equipment.

Client Contact Information:

Name: _____

Phone #: _____

Email: _____

Project Information:

Project Name: _____

Project Address: _____

Building Information (New/Existing): (Please circle one)

Roof Structure Type: _____

(i.e. Steel Joist, Steel Beams, etc...)

Roof Material: _____

(i.e. Steel Deck, Plywood, etc...)

Frame Information:

Of Frames: _____

QuickFrame Span (ft): _____

Quickframe Material Strength: _____

(i.e. 50 ksi, 45ksi, 30 ksi)

Roof Top Equipment Information:

Equipment Type: _____

(i.e. RTU, Condenser, Skylight, etc...)

Equipment Size and Weight: _____

(Attach Cut Sheet Of Equipment If Available)

Note: The above requested info is for the design of the QuickFrame **only**. The Building Roof Structure (New or Existing) shall be checked by a registered Structural Engineer to ensure the above proposed load supported by the QuickFrame does not overstress any roof members or building components.

YOUR VISION IS OUR MISSION

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