

Existing Cab Field Survey - Ceiling

Job Name: _____

Contact Name: _____

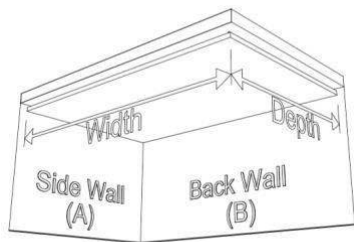
Quantity: _____

1. Ceiling Drop:
 Dimension from Canopy to face of Ceiling:
 2" 3" 4" 5" 6" 7"
 FabACab standard is 7"

2. Ceiling Type:
 Please circle one:
 Solid Island T-frame LED
 T-Frame Translucent

3. Cab Construction:
 Please circle one:
 Wood Metal Frame (skeleton/stick construction)

4. Existing Ceiling:
 Please fill out section completely



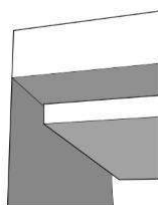
Enter all dimensions in inches, not feet.

Existing Ceiling Width _____"

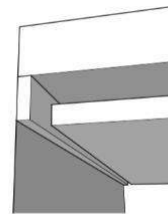
Existing Ceiling Depth _____"

Please check, if new ceiling is to be fabricated to existing ceiling dimensions.

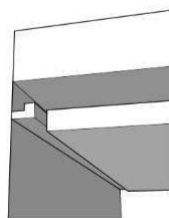
5. Existing Ceiling Coves/Soffits:
 Please circle the rendering that reflects your cab's coves/soffits



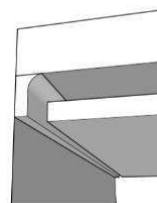
Regular Cove
 No obstructions in cab wall from floor to canopy



Tray Cove

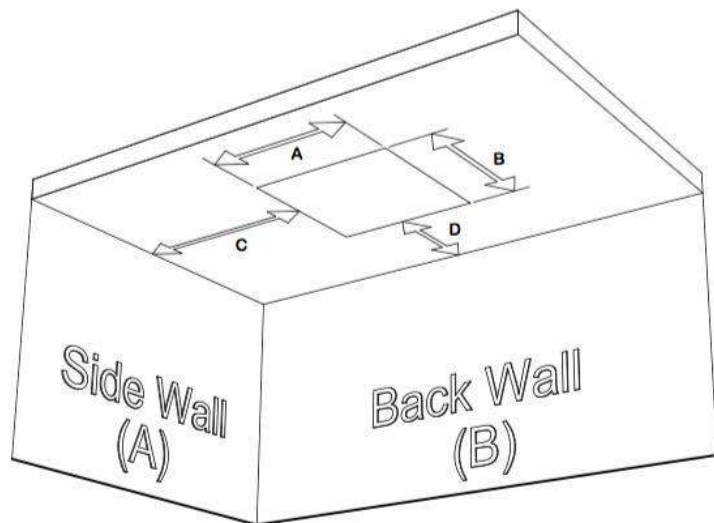


Light Cove



Round Cove

6. Escape Hatch:
 Please fill out section completely.



Enter all dimensions in inches, not feet.

Escape Hatch Width (A) _____"

Escape Hatch Depth (B) _____"

From Side Wall (C) _____"

From Back Wall (D) _____"