

RFQ Information Sheet

Sb 03-19-2015

Site Name Address City State zip County Latitude Longitude	Company Name Contact Person Address	
City State zip		
	Address	
County	Addiess	
	City State zip	
	Email	
Quote Due Date	Phone #	
Structure Type De:	esign Criteria =	TIA-222-G
Structure Height Str	ructure Class	
Level ground assumed Exp	posure	
Anchor material Standard or Fullsize Top	opo Category (ht. req'd if > 1)	ht.=
Fall radius required Rev	ev. G grouding	_
Lights	aveguide Bridge	
Standard Step bolts climbing Wa	aveguide Ladder	
Climbing Ladder Needed (details) yes or no details - face mounted / inside corner - please advise Ins	stallation prices wanted?	
Safety Climb Needed Lig	ghting Rod Needed	
Elevation Qty. Antenna Detail including model # & ROHN? No Yes / No	radomes - yes or no ice shields -	OF LINES
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
Notes: Please attach seperately or add special customer requirements here.		