

COLORGARD® & X-GARD® SNOW RETENTION FORM

PLEASE FILL OUT THE FORM COMPLETELY

****Please include a rough sketch of the building to be protected by snow retention including any adjacent buildings****

Company Name: _____

Job Name: _____ Phone #: _____

Form Completed By: _____

1. Who is the panel manufacturer? _____
2. What does the panel manufacturer call this panel profile? _____
3. What is the thickness (gauge) of this roof panel? _____ Ga.
4. What is the roof panel made of (Steel, Copper, etc.)? _____
5. Rafter length (eave-to-ridge dimension measured in the plan view) is _____ Ft.
6. Roof slope is _____:12 (IE: For 1/2:12 roof pitch enter .5 in this box)
7. Panel seam spacing is _____ inches.
8. Panel seam height is _____ inches.
9. This quote is based on design roof snow (not ground snow) load of _____ pounds per square foot.
(This information is critical for an accurate quote)
10. This lineal footage to be protected by snow retention _____ LF.

Run	Quantity	Total Run Length	Eave To Ridge Distance	Special Notes
A				
B				
C				
D				
E				
F				
G				
H				
I				

