

DRAWINGS SUBMITTAL FORM

Customer ID	
Project Name	
Specs:	<input type="checkbox"/> Electrical Design <input type="checkbox"/> Automation Design: <input type="checkbox"/> <u>Security</u> <input type="checkbox"/> CCTV <input type="checkbox"/> Access Control <input type="checkbox"/> RFID <input type="checkbox"/> Fire Alarm <input type="checkbox"/> IR Beams <input type="checkbox"/> Motion Detection <input type="checkbox"/> Window Contacts <input type="checkbox"/> <u>Lighting</u> <input type="checkbox"/> 110v <input type="checkbox"/> 220v <input type="checkbox"/> <u>Temp Control</u> <input type="checkbox"/> Thermostats <input type="checkbox"/> Humidity and Temp Sensing <input type="checkbox"/> <u>Audio Distribution</u> <input type="checkbox"/> NUVO <input type="checkbox"/> HIFI <input type="checkbox"/> <u>Interfaces</u> <input type="checkbox"/> HAI Touch <input type="checkbox"/> Portable Touch Screen <input type="checkbox"/> WebLink <input type="checkbox"/> Media Center <input type="checkbox"/> SnapLink
Budget:	
More info:	
Drawings:	<input type="checkbox"/> Attachment <input type="checkbox"/> CD <input type="checkbox"/> Papers <input type="checkbox"/> Email
Priority	<input type="checkbox"/> N/A <input type="checkbox"/> 2Weeks <input type="checkbox"/> 1Weeks <input type="checkbox"/> 48H <input type="checkbox"/> 24H <input type="checkbox"/> ASAP
Follow up Date:	/ /
Due Date:	/ /

Office Use:

Reporter Name & ID	
Reporter Comments	
Drawings Submission Date	/ /
Reporter Signature	